



Gold Coast

Population Health Profile

November 2015



Australian Government

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GOLD COAST

An Australian Government Initiative



Gold Coast Health
Building a healthier community

Version: November 2015

Suggested citation: Gold Coast Population Health Profile 2015: A Gold Coast Hospital and Health Service and Gold Coast Primary Health Network collaboration.

This population health profile is a collaborative effort of Gold Coast Health and Gold Coast Primary Health Network. The document was endorsed by the Gold Coast Hospital and Health Service and Gold Coast Primary Health Executive Steering Committee on 10th February 2016.

Elements of the Population Health Profile will be updated on a biennial basis, however population data will only be updated when new census data is available.

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Disclaimer: The information contained in this report has been collated from a variety of original sources. It is recommended that the referenced original source be used to confirm the accuracy of reported information.

Gold Coast Primary Health Network gratefully acknowledges the financial and other support from the Australian Government Department of Health. While the Australian Government Department of Health has contributed to the funding of this material, the information contained in it does not necessarily reflect the views of the Australian Government and is not advice that is provided, or information that is endorsed, by the Australian Government. The Australian Government is not responsible in negligence or otherwise for any injury, loss, or damage however arising from the use of or reliance on the information provided herein.



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Gold Coast Health
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Key data sources and definitions

The most recent data is included in this report to describe the population profile of the Gold Coast.

Socio-demographic data

Socio-demographic data was retrieved from the Queensland Regional Database, developed and maintained by the Queensland Government Statistician's Office. Data is reported at the Gold Coast Statistical Area Level 4 (SA4), and based on Australian Bureau of Statistics (ABS), Australian Statistical Geography Standard (ASGS) July 2011. Supplementary data was supplied by the Public Health Information Development Unit.

Health data

Health outcomes and issues data were retrieved from a number of databases. This includes Queensland Hospital Admitted Patient Data Collection (QHAPDC), Queensland Notifiable Conditions System (NOCS), Self-Reported Health Status Survey Queensland, Queensland Chief Health Officer Report, Cancer Council Queensland, and QCCAT's Oncology Analysis System (OASys).

Data pertaining to primary and community health services were supplied by Gold Coast Primary Health Network based on analysis of MSB item numbers and the National Health Performance Authority (NHPA) reports.

Key definitions

All rates for deaths, hospitalisations, cancer incidence and burden of disease are age standardised (reference population: Queensland 2013). Disease prevalence, notifications, risk and protective factor prevalence are not age standardised, although for comparative purposes, age standardised rates are used where available.

Aboriginal and Torres Strait Islander peoples: These populations are referred to as Indigenous Queenslanders or Indigenous Australians throughout this report.

Burden: a frequently used term with two meanings, usually evident from the context:

- Technical use - burden of disease analyses using the disability adjusted life year (DALY)
- General use - for example, health burden or disease burden or relative burden.

Hospital and Health Services (HHSs): 16 geographically defined HHSs, and one specialist population based HHS (Children's Health Queensland), were established in Queensland in July 2012. Gold Coast Hospital and Health Service provides health care from the state boarder of New South Wales to the Coomera Region in Queensland. It comprises the Gold Coast City Council local government area and neighbouring Tamborine - Canungra 'Statistical Local Area' (SLA), which is part of the Scenic Rim Regional Council.

Primary Health Network (PHN): 31 geographically defined PHNs have been established across Australia. The Gold Coast PHN boundary comprises the same area as the Gold Coast HHS. This is also the same catchment as the ABS Gold Coast Statistical Area 4 (SA4). This are will be referred to throughout this document as the Gold Coast Health Area.

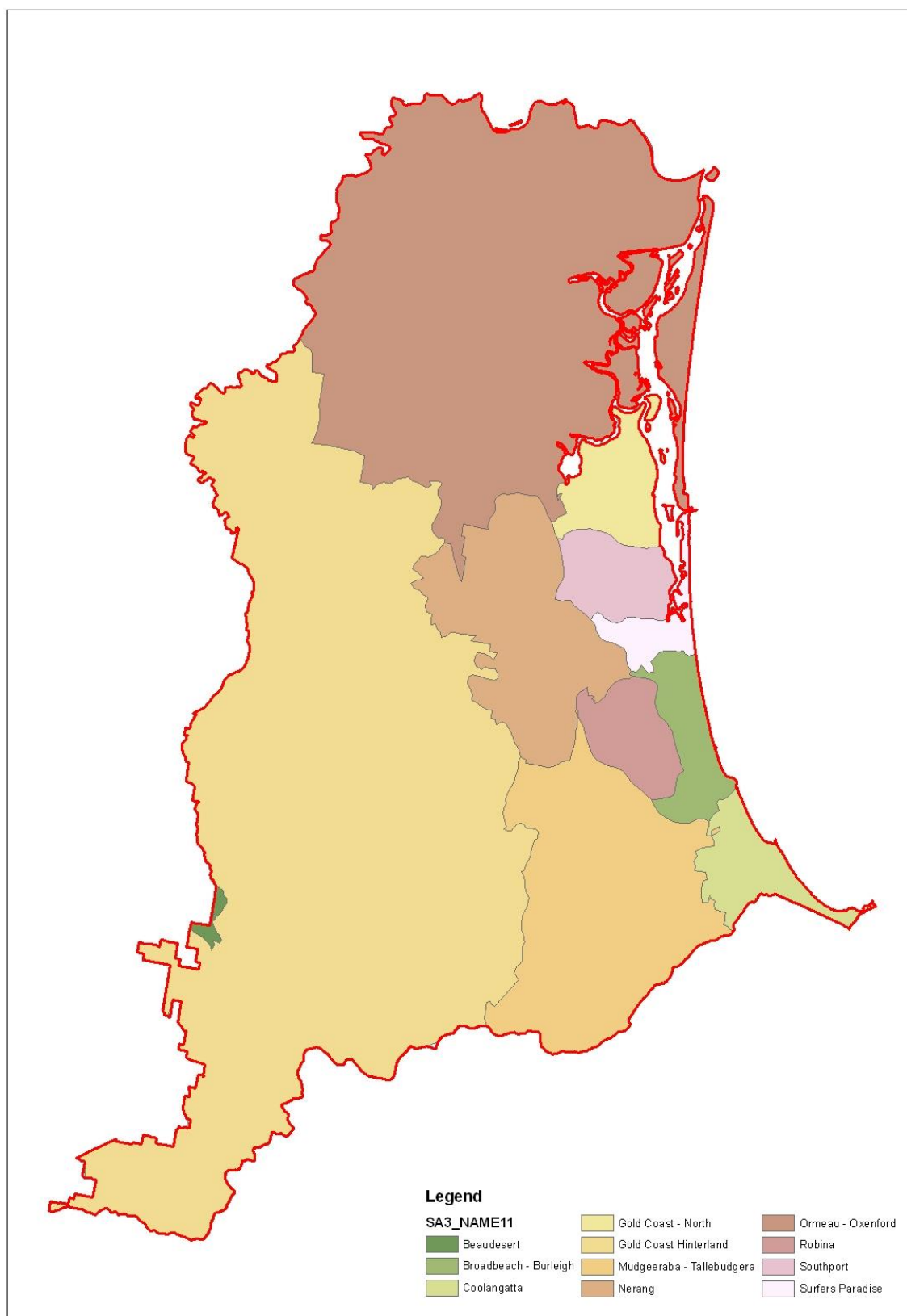
Median age of death: A metric subject to limitations, where the age distribution and size of the population in a selected area may influence the median age of death, and its comparability with other areas. Unusual and unexpected events such as a bus accident may result in a larger than average number of deaths, and this would have a greater impact on estimates from areas with smaller populations than others. In this report, median age of death is based on year of death to ensure comparability with Indigenous Queensland death statistics and aggregated years are reported to minimise year-to-year variability.

Premature death: a term used in two contexts:

- A category in burden of disease analyses - this refers to years of life lost (YLL).
- Deaths that occur before the age of 75 years.

Significance: Within this report, the term significant is used to reflect a level of importance as well as the statistical difference. However, the reporting of difference between categories is only noted when the difference is statistically significant (based on non-overlap of 95% confidence intervals)

Gold Coast Health Area



1. Socio-demographic Profile

Socio-demographic data as reported in the [Gold Coast Statistical Area Level 4 \(SA4\)](#) Queensland Regional Profiles developed and maintained by the Queensland Government Statistician's Office. Data are based on Australian Bureau of Statistics (ABS), Australian Statistical Geography Standard (ASGS) July 2011 and other data sources as described in the [full report](#)¹.

1.1 Demography

1.1.1 Estimated resident population

The estimated resident population (ERP) figure is the official population estimate, and represents the best possible estimate of the resident population. It is anticipated the next update will be in April 2016.

Gold Coast SA4

- ERP of 560,266 persons as at 30 June 2014
- Average annual growth rate of 1.9% over five years
- Average annual growth rate of 2.5% over ten years
- Within the region, Ormeau - Oxenford SA3 had the largest population with 111,022 persons
- Within the region, Ormeau - Oxenford SA3 had the fastest population growth over five years with 4.6%
- ERP for Gold Coast is 12% of Qld ERP

Queensland

- ERP of 4,722,447 persons as at 30 June 2014
- Average annual growth rate of 1.8% over five years
- Average annual growth rate of 2.1% over ten years

Table 1: Estimated resident population Gold Coast SA4 2016

Age Group	Males	Females	Persons	% population
00-04	18,775	17,770	36,545	6%
05-09	18,584	17,598	36,182	6%
10-14	18,169	16,996	35,165	6%
15-19	18,682	18,600	37,282	6%
20-24	20,499	21,559	42,058	7%
25-29	20,830	21,558	42,387	7%
30-34	20,774	21,318	42,092	7%
35-39	19,662	39,936	39,936	7%
40-44	20,404	21,292	41,696	7%
45-49	19,856	20,905	40,761	7%
50-54	18,251	19,723	37,974	6%
55-59	17,142	18,755	35,897	6%
60-64	15,434	16,553	31,987	5%
65-69	14,935	15,534	30,468	5%
70-74	11,516	12,041	23,557	4%
75-79	8,042	8,647	16,689	3%
80-84	4,891	5,997	10,888	2%
85+	4,472	7,173	11,645	2%
Total	290,918	302,291	593,209	100%

Source: Queensland Government Population Projections, 2013 edition (medium series).

Table 2: Estimated resident population by SA3, Gold Coast SA4 and Queensland (2004-14)

SA4 / SA3 / State	As at 30 June			Average annual growth rate	
	2004	2009	2014p	2004 -2009	2009-2014
	— number —			— % —	
Gold Coast SA4	435,960	509,133	560,266	2.5	1.9
Broadbeach - Burleigh	56,979	59,837	62,938	1.0	1.0
Coolangatta	49,514	51,266	52,989	0.7	0.7
Gold Coast - North	56,153	60,640	65,477	1.5	1.5
Gold Coast Hinterland	15,762	17,447	18,510	1.6	1.2
Mudgeeraba - Tallebudgera	26,494	30,762	33,576	2.4	1.8
Nerang	52,841	62,423	68,295	2.6	1.8
Ormeau - Oxenford	56,575	88,642	111,022	7.0	4.6
Robina	38,862	46,207	49,713	2.5	1.5
Southport	49,262	55,278	58,982	1.8	1.3
Surfers Paradise	33,518	36,631	38,764	1.5	1.1
Queensland	3,829,970	4,328,771	4,722,447	2.1	1.8

Source: ABS 3218.0, Regional Population Growth, Australia, 2013-14

1.1.2 Population by age and sex

The estimated resident population (ERP) figure is the official population estimate, and represents the best possible estimate of the resident population. It is anticipated the next update will be in September 2015.

Gold Coast SA4

- 18.3% aged 0 - 14 years as at 30 June 2013
- 66.7% aged 15 - 64 years
- 15.0% aged 65+ years
- Within the region, Ormeau - Oxenford SA3 had the largest percentage of persons aged 0 - 14 with 24.4%
- Within the region, Surfers Paradise SA3 had the largest percentage of persons aged 15 - 64 with 70.9%
- Within the region, Gold Coast - North SA3 had the largest percentage of persons aged 65+ with 20.8%

Queensland

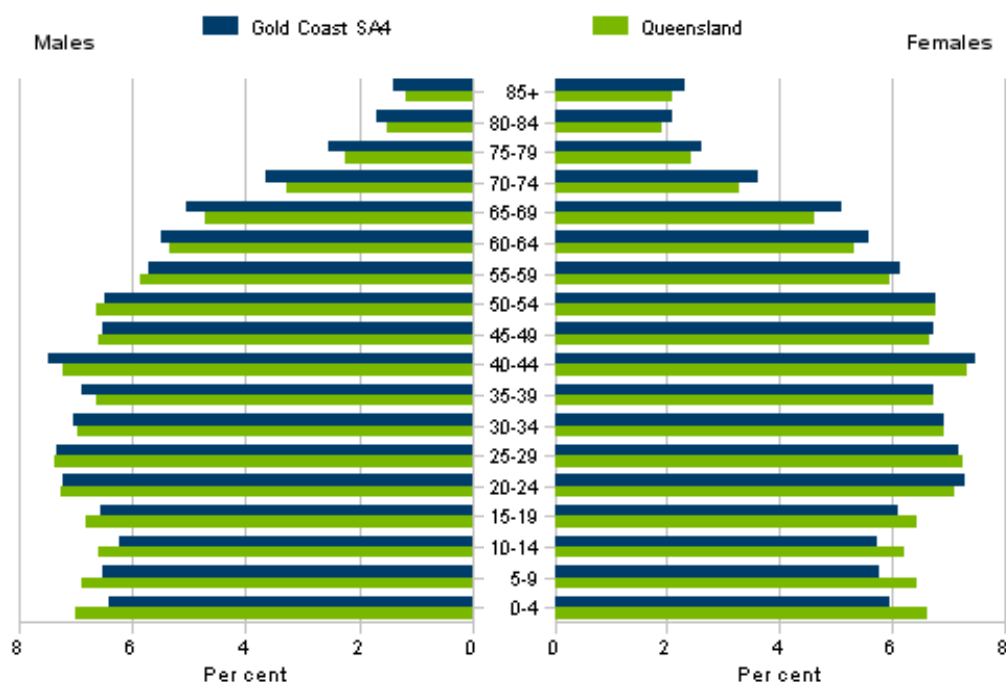
- 19.8% aged 0 - 14 years as at 30 June 2013
- 66.5% aged 15 - 64 years
- 13.6% aged 65+ years

Table 3: Estimated resident population by age and SA3, Gold Coast SA4 and Queensland (2013)

SA4 / SA3 / State	Age group									
	0–14		15–24		25–44		45–64		65+	
	number	%	number	%	number	%	number	%	number	%
Gold Coast SA4	100,791	18.3	74,806	13.6	157,196	28.5	136,112	24.7	82,800	15.0
Broadbeach - Burleigh	8,913	14.2	7,860	12.6	19,087	30.5	15,193	24.3	11,535	18.4
Coolangatta	8,670	16.4	6,422	12.1	14,084	26.6	14,203	26.8	9,605	18.1
Gold Coast - North	9,781	15.2	7,690	11.9	16,920	26.2	16,676	25.9	13,432	20.8
Gold Coast Hinterland	3,411	18.8	1,819	10.0	4,263	23.5	5,641	31.1	3,017	16.6
Mudgeeraba - Tallebudgera	7,604	23.0	4,287	13.0	8,543	25.8	8,848	26.8	3,772	11.4
Nerang	14,075	20.8	9,340	13.8	19,153	28.4	16,662	24.7	8,322	12.3
Ormeau - Oxenford	26,150	24.4	13,673	12.8	32,720	30.6	24,130	22.6	10,323	9.6
Robina	8,672	17.7	7,839	16.0	13,399	27.4	11,582	23.7	7,473	15.3
Southport	9,119	15.6	10,116	17.3	17,234	29.4	13,512	23.1	8,563	14.6
Surfers Paradise	4,396	11.5	5,760	15.0	11,793	30.7	9,665	25.2	6,758	17.6
Queensland	924,352	19.8	642,291	13.8	1,313,426	28.2	1,142,755	24.5	633,979	13.6

Source: ABS 3235.0, Population by Age and Sex, Regions of Australia, 2013

Figure 1: Estimated resident population by age and sex, Gold Coast SA4 and Queensland (2013)



Source: ABS 3235.0, Population by Age and Sex, Regions of Australia, 2013

1.1.3 Population projections

These are the Queensland Government population projections and it is anticipated the next update will be in December 2016. From 2011 to 2036, the population for Gold Coast SA4 is projected to increase from 528,766 persons to 922,267 persons. The rate of population growth is expected to peak between 2016 - 2021 and the annual population for both Queensland and Gold Coast are expected to slow from 2021.

Gold Coast SA4

- Population projected to be 922,267 persons as at 30 June 2036
- Increase of 2.3% per year over 25 years
- Within the region, Ormeau - Oxenford SA3 is projected to have the largest population by 2036 with 278,556 persons
- Within the region, Ormeau - Oxenford SA3 is projected to have the fastest growth in population between 2011 to 2036 with an average annual rate of 4.3% per year

Queensland

- Population projected to be 7,095,177 persons as at 30 June 2036
- Increase of 1.9% per year over 25 years

Table 4: Projected population by SA3, Gold Coast SA4 and Queensland (2011-36)

SA4 / SA3 / State	As at 30 June						Average annual growth rate 2011–2036
	2011(a)	2016	2021	2026	2031	2036	
	— number —						%
Gold Coast SA4	528,766	593,209	673,496	753,583	836,738	922,267	2.3
Broadbeach - Burleigh	60,897	63,414	68,094	72,567	76,375	79,960	1.1
Coolangatta	52,239	54,997	62,603	67,882	70,685	72,737	1.3
Gold Coast - North	62,272	64,927	69,243	73,381	76,944	82,098	1.1
Gold Coast Hinterland	17,713	18,421	18,737	19,906	20,998	21,549	0.8
Mudgeeraba - Tallebudgera	32,161	33,711	34,736	36,598	38,013	39,930	0.9
Nerang	64,885	72,828	80,642	87,322	98,046	107,037	2.0
Ormeau - Oxenford	97,116	130,962	168,748	204,424	242,415	278,556	4.3
Robina	47,200	51,982	56,207	64,488	71,809	80,025	2.1
Southport	56,993	61,591	70,442	79,448	88,895	100,994	2.3
Surfers Paradise	37,290	40,375	44,043	47,566	52,557	59,379	1.9
Queensland	4,476,778	4,946,319	5,477,082	6,007,578	6,548,220	7,095,177	1.9

Source: Queensland Government Population Projections, 2013 edition (medium series)

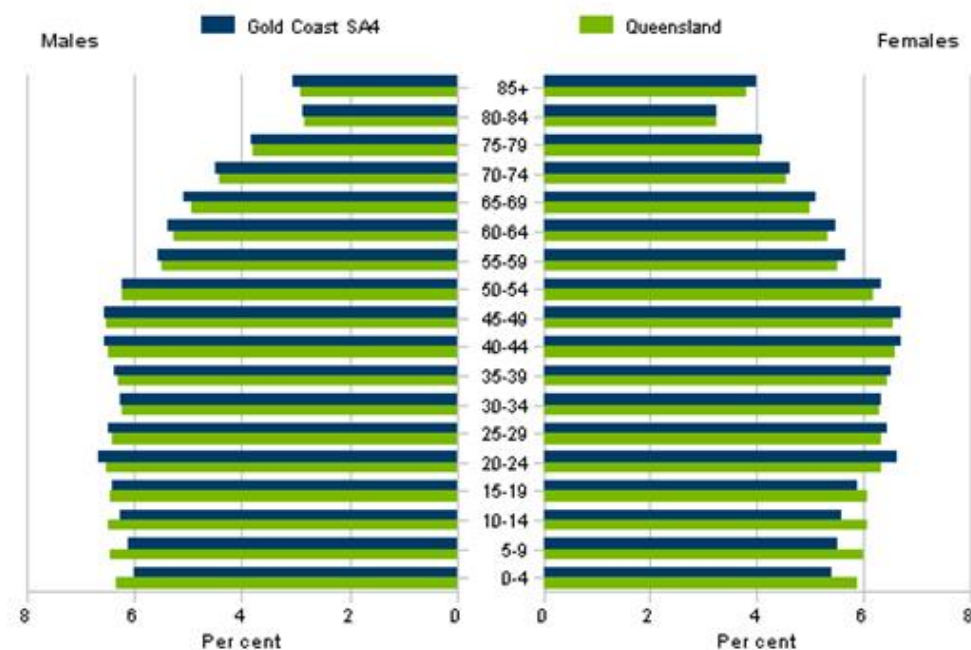
Refer to explanatory notes for additional information.

(a) 2011 data are estimated resident population (ERP).

For more detailed data on the Queensland Government population projections, please refer to the Queensland Government Statistician's Office website at

<http://www.qgso.qld.gov.au/subjects/demography/population-projections/index.php>

Figure 2: Projected population by age and sex, Gold Coast SA4 and Queensland, 30 June 2011 and 30 June 2036



Source: Queensland Government Population Projections, 2013 edition (medium series)

1.1.4 Indigenous population

Indigenous population is based on the 2011 Census of Population and Housing question about Indigenous status where each person is asked to identify whether they are of Aboriginal and/or Torres Strait Islander origin. This is based on persons by place of usual residence. Local Indigenous service providers report that the identified population are likely to be an underestimation.

Gold Coast SA4

- 6,350 persons (or 1.3%) were Indigenous
- Within the region, Coolangatta SA3 had the largest percentage of Indigenous persons with 2.0%

Queensland

- 155,824 persons (or 3.6%) were Indigenous

Table 5: Indigenous status by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Indigenous persons						Non-Indigenous persons		Total persons ^(b)
	Aboriginal	Torres Strait Islander	Both ^(a)	Total					
	— number —			number	%		number	%	
Gold Coast SA4	5,657	431	262	6,350	1.3		470,234	92.6	507,642
Broadbeach - Burleigh	466	31	34	531	0.9		52,732	91.0	57,920
Coolangatta	840	88	73	1,001	2.0		46,277	92.4	50,098
Gold Coast - North	660	44	24	728	1.2		55,213	92.6	59,606
Gold Coast Hinterland	196	11	0	207	1.2		16,307	95.2	17,136
Mudgeeraba - Tallebudgera	286	24	20	330	1.1		29,456	94.8	31,076
Nerang	790	66	30	886	1.4		58,525	93.4	62,675
Ormeau - Oxenford	1,137	86	35	1,258	1.3		88,567	94.2	94,057
Robina	386	19	20	425	0.9		41,908	92.7	45,191
Southport	670	39	17	726	1.3		50,132	91.9	54,547
Surfers Paradise	220	23	8	251	0.7		31,120	88.1	35,329
Queensland	122,896	20,094	12,834	155,824	3.6		3,952,707	91.2	4,332,740

Source: ABS, Census of Population and Housing, 2011, Indigenous Profile - I02 (usual residence)

(a) Applicable to persons who are of 'both Aboriginal and Torres Strait Islander origin'.

(b) Includes Indigenous status not stated

1.1.5 Births and deaths

Birth and death statistics are an estimate of the number of births and deaths that have been registered in Australia's state and territory Registries of Births, Deaths and Marriages over a calendar year. These estimates are useful for two distinct purposes – use as a component of population growth and for analysis of fertility and mortality. It is anticipated the next update will be in December 2015.

Gold Coast SA4

- 6,946 registered births in 2013
- 3,312 registered deaths in 2013
- Within the region, Ormeau - Oxenford SA3 had the largest crude birth rate with 16.1 births per 1,000 population

Queensland

- 63,354 registered births in 2013
- 27,901 registered deaths in 2013

Table 6: Registered births and deaths by SA3, Gold Coast SA4 and Queensland (2013)

SA4 / SA3 / State	Births		Deaths		Natural increase
	number	rate ^(a)	number	rate ^(a)	number
Gold Coast SA4	6,946	12.6	3,312	6.0	3,634
Broadbeach - Burleigh	714	11.4	412	6.6	302
Coolangatta	652	12.3	362	6.8	290
Gold Coast - North	733	11.4	552	8.6	181
Gold Coast Hinterland	184	10.1	97	5.3	87
Mudgeeraba - Tallebudgera	385	11.6	128	3.9	257
Nerang	950	14.1	335	5.0	615
Ormeau - Oxenford	1,718	16.1	403	3.8	1,315
Robina	608	12.4	348	7.1	260
Southport	691	11.8	460	7.9	231
Surfers Paradise	311	8.1	215	5.6	96
Queensland^(b)	63,354	13.6	27,901	6.0	35,453

Source: ABS 3301.0, Births, Australia, 2013; ABS 3302.0, Deaths, Australia, 2013

Refer to explanatory notes for additional information.

(a) Crude rate per 1,000 persons.

(b) Queensland totals include births and deaths where the usual residence was overseas, no fixed abode, Offshore and Migratory, and Queensland undefined.

1.1.6 Migration 1 year ago

Migration one year ago compares the usual address of household members on Census Night 2011 with their usual address one year earlier. This is based on persons by place of usual residence.

Gold Coast SA4

- 374,291 persons usually resided in the same address as one year ago
- 95,690 persons (or 19.1%) usually resided in a different address one year ago
- Within the region, Surfers Paradise SA3 had the largest percentage of persons with a different usual address one year ago with 23.1%

Queensland

- 3,278,187 persons usually resided in the same address as one year ago
- 764,695 persons (or 17.9%) usually resided in a different address one year ago

Table 7: Place of usual residence one year ago(a) by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Same address	Different address			Total ^(b)	Proportion with different address	Total persons ^(c)
		Within Queensland	Rest of Australia	Overseas			
	number	— number —				%	number
Gold Coast SA4	374,291	71,532	13,335	9,658	95,690	19.1	501,383
Broadbeach - Burleigh	41,307	8,200	1,679	1,162	11,174	19.5	57,325
Coolangatta	38,078	5,893	1,840	644	8,462	17.1	49,474
Gold Coast - North	43,534	8,859	1,379	1,165	11,588	19.7	58,919
Gold Coast Hinterland	13,887	1,880	317	172	2,394	14.1	16,954
Mudgeeraba - Tallebudgera	24,777	3,746	606	278	4,704	15.3	30,695
Nerang	48,834	7,719	1,168	798	9,831	15.9	61,850
Ormeau - Oxenford	69,328	14,881	2,325	1,695	19,092	20.6	92,545
Robina	32,605	6,726	1,395	1,061	9,284	20.8	44,633
Southport	38,984	8,102	1,384	1,447	11,070	20.5	53,934
Surfers Paradise	22,958	5,518	1,247	1,235	8,088	23.1	35,055
Queensland	3,278,187	616,283	75,239	63,184	764,695	17.9	4,275,277

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B38 (usual residence)

(a) Based on persons aged one year and over.

(b) Includes persons who stated that they were usually resident at a different address 1 year ago but did not state that address.

(c) Includes persons who did not state whether they were usually resident at a different address 1 year ago.

1.1.7 Migration 5 years ago

Migration five years ago compares the usual address of household members on Census Night 2011 with their usual address five years earlier. This is based on persons by place of usual residence.

Gold Coast SA4

- 209,442 persons usually resided in the same address as five years ago
- 231,428 persons (or 48.6%) usually resided in a different address five years ago
- Within the region, Ormeau - Oxenford SA3 had the largest percentage of persons with a different usual address five years ago with 57.3%

Queensland

- 1,958,914 persons usually resided in the same address as five years ago
- 1,815,132 persons (or 48.6%) usually resided in a different address five years ago

1.1.8 Country of birth

Country of birth has been derived from the 2011 Census of Population and Housing question 'In which country was the person born?' This is based on persons by place of usual residence.

Gold Coast SA4

- 141,115 persons (or 27.8%) were born overseas
- Within the region, Ormeau - Oxenford SA3 had the largest number of persons born overseas with 26,295
- Within the region, Robina SA3 had the largest percentage of persons born overseas with 33.6%

Queensland

- 888,636 persons (or 20.5%) were born overseas

Table 8: Country of birth by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Born in Australia		Born in ESB countries ^(a)		Born overseas Born in NESB countries ^(b)		Total ^(b)		Total persons ^(c)
	number	%	number	%	number	%	number	%	number
Gold Coast SA4	332,089	65.4	88,399	17.4	52,716	10.4	141,115	27.8	507,642
Broadbeach - Burleigh	38,159	65.9	8,848	15.3	5,764	10.0	14,612	25.2	57,919
Coolangatta	37,864	75.6	6,211	12.4	2,725	5.4	8,936	17.8	50,099
Gold Coast - North	36,984	62.0	11,311	19.0	7,026	11.8	18,337	30.8	59,605
Gold Coast Hinterland	12,467	72.8	2,830	16.5	1,096	6.4	3,926	22.9	17,135
Mudgeeraba - Tallebudgera	22,278	71.7	5,207	16.8	2,232	7.2	7,439	23.9	31,075
Nerang	42,047	67.1	11,579	18.5	5,470	8.7	17,049	27.2	62,673
Ormeau - Oxenford	63,162	67.2	19,823	21.1	6,472	6.9	26,295	28.0	94,057
Robina	26,999	59.7	8,555	18.9	6,607	14.6	15,162	33.6	45,191
Southport	32,626	59.8	8,345	15.3	9,314	17.1	17,659	32.4	54,547
Surfers Paradise	19,501	55.2	5,669	16.0	6,016	17.0	11,685	33.1	35,328
Queensland	3,192,115	73.7	478,290	11.0	410,346	9.5	888,636	20.5	4,332,738

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B09 (usual residence)

Refer to explanatory notes for additional information.

(a) Includes the UK, Ireland, Canada, USA, South Africa and New Zealand.

(b) Includes countries not identified individually, 'Australian External Territories', 'Inadequately described' and 'At sea' responses.

(c) Includes not stated responses

1.1.9 Proficiency in spoken English

Proficiency in spoken English has been derived from the 2011 Census of Population and Housing question 'How well does the person speak English?', if the person speaks a language other than English at home. This topic relates to persons who stated they were born overseas as at Census Night 2011. The most common non-English language spoken at home for the total population of Gold Coast SA4 was Chinese (1.4%).

Gold Coast SA4

- 40,398 persons (or 28.6%) stated they spoke a language other than English at home
- Within the region, Southport SA3 had the largest number of overseas-born persons who stated they spoke a language other than English at home with 7,783
- Within the region, Southport SA3 had the largest percentage of overseas-born persons who stated they spoke a language other than English at home with 44.1%

Queensland

- 319,949 persons (or 36.0%) stated they spoke a language other than English at home

Consistent with the increasing CALD population on the Gold Coast, together with improved cultural understanding of the healthcare workforce there has been a significant increase in demand for Interpreter Services over the past five (5) years. In 2010, 3938 requests for interpreters were submitted and in 2015 it is projected that there will be 9,610 requests for interpreters, which is a 244% increase. Based upon this rate of growth by 2026 it is likely that 18,000 requests for interpreters will be made annually.

1.1.10 Family composition

In the context of the 2011 Census of Population and Housing, families are classified in terms of the relationships that exist between a single family reference person and each other member of that family. This is based on families by place of usual residence.

Gold Coast SA4

- 135,874 families
- 41.1% of total families were couple families with children
- Within the region, Ormeau - Oxenford SA3 had the largest number of couple families with children with 12,939
- Within the region, Southport SA3 had the largest percentage of one-parent families with 19.7%

Queensland

- 1,148,179 families
- 42.8% of total families were couple families with children

Table 9: Family composition(a) by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Couple family with no children		Couple family with children		One-parent family		Total ^(b)
	number	%	number	%	number	%	number
Gold Coast SA4	55,049	40.5	55,806	41.1	22,913	16.9	135,874
Broadbeach - Burleigh	6,931	46.6	5,145	34.6	2,501	16.8	14,868
Coolangatta	5,533	41.5	4,957	37.2	2,589	19.4	13,321
Gold Coast - North	7,619	46.8	5,319	32.7	3,032	18.6	16,265
Gold Coast Hinterland	2,233	45.3	2,019	41.0	639	13.0	4,924
Mudgeeraba - Tallebudgera	2,864	33.0	4,434	51.0	1,312	15.1	8,686
Nerang	5,926	34.5	8,156	47.4	2,920	17.0	17,190
Ormeau - Oxenford	9,411	35.7	12,939	49.1	3,764	14.3	26,353
Robina	4,651	38.1	5,072	41.6	2,272	18.6	12,200
Southport	5,411	39.8	5,160	38.0	2,681	19.7	13,588
Surfers Paradise	4,457	52.6	2,607	30.8	1,207	14.3	8,470
Queensland	453,102	39.5	491,200	42.8	184,547	16.1	1,148,179

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B25 (families and persons)

(a) Includes same-sex couple families.

(b) Includes other families.

1.1.11 Household composition

Household composition describes the type of household within a dwelling, whether a family is present or not and whether or not other unrelated household members are present. This is based on occupied private dwellings.

Gold Coast SA4

- 186,431 households
- 69.5% of total households were one family households
- Within the region, Ormeau - Oxenford SA3 had the largest percentage of one family households

Queensland

- 1,547,304 households
- 70.7% of total households were one family households

Table 10: Household composition by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	One family households		Multiple family households		Group households		Lone person households		Total households
	number	%	number	%	number	%	number	%	number
Gold Coast SA4	129,557	69.5	3,144	1.7	11,030	5.9	42,700	22.9	186,431
Broadbeach - Burleigh	14,366	62.0	251	1.1	2,043	8.8	6,508	28.1	23,168
Coolangatta	12,833	64.3	246	1.2	1,135	5.7	5,737	28.8	19,951
Gold Coast - North	15,699	64.5	286	1.2	1,327	5.5	7,032	28.9	24,344
Gold Coast Hinterland	4,689	75.1	111	1.8	194	3.1	1,246	20.0	6,240
Mudgeeraba - Tallebudgera	8,125	80.9	271	2.7	333	3.3	1,309	13.0	10,038
Nerang	16,122	76.0	533	2.5	841	4.0	3,721	17.5	21,217
Ormeau - Oxenford	24,935	81.1	705	2.3	1,029	3.3	4,070	13.2	30,739
Robina	11,609	73.0	297	1.9	977	6.1	3,028	19.0	15,911
Southport	12,977	63.4	311	1.5	1,760	8.6	5,421	26.5	20,469
Surfers Paradise	8,202	57.1	133	0.9	1,391	9.7	4,628	32.2	14,354
Queensland	1,094,467	70.7	26,361	1.7	72,966	4.7	353,510	22.8	1,547,304

Source: ABS, Census of Population and Housing, 2011, unpublished data (occupied private dwellings)

1.1.12 Homeless persons

The ABS defines someone as homeless if their current living arrangement: is a dwelling that is inadequate, has no tenure, or if their initial tenure is short and not extendable, or does not allow them to have control of, and access to, space for social relations. These counts are based on place of enumeration. Service providers report that this is likely to be an under-representation of the true numbers.

Gold Coast SA4

- 1,426 homeless persons
- 26.7 homeless persons per 10,000 persons
- Within the region, Southport SA3 had the highest rate of homelessness (53.4 persons per 10,000 persons)

Queensland

- 19,834 homeless persons
- 44.5 homeless persons per 10,000 persons

Table 11: Homeless persons by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Homeless persons		Total persons
	number	rate ^(a)	number
Gold Coast SA4	1,426	26.7	534,082
Broadbeach - Burleigh	134	20.4	65,846
Coolangatta	236	43.4	54,393
Gold Coast - North	206	34.1	60,329
Gold Coast Hinterland	41	23.5	17,442
Mudgeeraba - Tallebudgera	44	14.2	30,907
Nerang	104	16.6	62,561
Ormeau - Oxenford	174	18.5	94,004
Robina	69	15.1	45,660
Southport	301	53.4	56,334
Surfers Paradise	117	25.1	46,609
Queensland	19,834	44.5	4,457,909

Source: ABS, *Census of Population and Housing, 2011, Place of Enumeration Profile - P01* and ABS 2049.0, *Census of Population and Housing: Estimating homelessness, 2011*

(a) Rate per 10,000 persons.

Refer to explanatory notes for additional information.

1.1.13 Internet Connection

The type of Internet connection has been derived from the 2011 Census of Population and Housing question '*Can the Internet be accessed at this dwelling?*' This is based on occupied private dwellings by place of enumeration. This is likely to have increased significantly since last census particular with the increase in use of mobile devices.

Gold Coast SA4

- 151,593 occupied private dwellings (or 81.3%) had Internet connections
- Within the region, Ormeau - Oxenford SA3 had the largest number of dwellings with Internet connections with 26,786
- Within the region, Coolangatta SA3 had the largest percentage of dwellings without Internet connections with 20.9%

Queensland

- 1,211,884 occupied private dwellings (or 78.3%) had Internet connections

Table 12: Internet connections in occupied private dwellings(a)(b) by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	No Internet connection		With Internet connection				Total dwellings ^(d)
			Broadband	Dial-up	Total ^(c)		
	number	%	— number —		number	%	number
Gold Coast SA4	28,002	15.0	137,003	5,598	151,593	81.3	186,434
Broadbeach - Burleigh	4,117	17.8	16,094	703	18,125	78.2	23,165
Coolangatta	4,162	20.9	13,474	632	15,069	75.5	19,951
Gold Coast - North	4,706	19.3	16,746	762	18,678	76.7	24,344
Gold Coast Hinterland	853	13.7	4,751	261	5,214	83.6	6,239
Mudgeeraba - Tallebudgera	965	9.6	8,045	336	8,726	86.9	10,039
Nerang	2,780	13.1	16,249	590	17,674	83.3	21,218
Ormeau - Oxenford	2,974	9.7	24,443	922	26,786	87.1	30,746
Robina	1,888	11.9	12,298	460	13,542	85.1	15,917
Southport	3,382	16.5	14,740	535	16,215	79.2	20,465
Surfers Paradise	2,178	15.2	10,162	402	11,569	80.6	14,354
Queensland	281,467	18.2	1,103,036	45,088	1,211,884	78.3	1,547,301

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B35 (occupied private dwellings)

(a) Excludes visitors only and other not classifiable households.

(b) Where a dwelling has more than one type of Internet connection only one is recorded.

(c) Includes other Internet connection.

(d) Includes Internet connection not stated.

1.2 Society

1.2.1 Early childhood education and care services

The early childhood education and care services data are based on administrative data supplied by the Department of Education and Training. Data is updated twice yearly with an approximate delay of 1 month after the reporting period. It is anticipated the next update will be in September 2015.

Gold Coast SA4

- 285 early childhood education and care services as at 28 February 2015
- 182 long day care services
- Within the region, Ormeau - Oxenford SA3 had the largest number of services with 72

Queensland

- 2,971 early childhood education and care services as at 28 February 2015
- 1,437 long day care services

Table 13: Early childhood education and care services by SA3, Gold Coast SA4 and Queensland (2015)

SA4 / SA3 / State	Family day care	Kindergartens	Long day care	School aged care	Limited hours care	Total ^(a)
	— number —					
Gold Coast SA4	6	28	182	66	0	285
Broadbeach - Burleigh	0	4	14	5	0	23
Coolangatta	0	4	10	4	0	18
Gold Coast - North	0	2	18	5	0	25
Gold Coast Hinterland	1	2	3	3	0	9
Mudgeeraba - Tallebudgera	1	4	16	8	0	29
Nerang	1	1	27	11	0	40
Ormeau - Oxenford	3	8	43	17	0	72
Robina	0	1	15	4	0	21
Southport	0	1	30	6	0	38
Surfers Paradise	0	1	6	3	0	10
Queensland	124	520	1,437	717	35	2,971

Source: Office for Early Childhood Education and Care, Department of Education and Training

(a) Total includes Other service types (for example Child and Family Support Hubs and Community Services).

1.2.2 Australian Early Development Census (AEDC)

The AEDC is a national collection of information about how children are developing prior to school. The AEDC instrument encompasses five domains of early childhood development which are predictors of a child's health, education and social outcomes. The five domains are:

- Physical health and wellbeing
- Social competence
- Emotional maturity
- Language and cognitive skills
- Communication skills and general knowledge

The AEDC reports whether children are on track, at risk or developmentally vulnerable across each of the five domains. Children that are developmentally vulnerable demonstrate much lower than average competencies in that domain.

Gold Coast SA4

- 23.0% developmentally vulnerable children in one or more domains in 2012
- 12.0% developmentally vulnerable children in two or more domains in 2012
- The social competence domain had the largest percentage of developmentally vulnerable children (11.2%)
- Within the region, Robina SA3 had the largest percentage of developmentally vulnerable children in two or more domains (14.2%)

Queensland

- 26.2% developmentally vulnerable children in one or more domains in 2012
- 13.8% developmentally vulnerable children in two or more domains in 2012
- The physical health and wellbeing domain had the largest percentage of developmentally vulnerable children (11.6%)

Table 14: Developmentally vulnerable children by domain by SA3, Gold Coast SA4 and Queensland (2012)

SA4 / SA3 / State	Domain					Summary		Children assessed
	Physical health and wellbeing	Social competence	Emotional maturity	Language and cognitive	Communication skills and general knowledge	One domain	Two or more domains	
	— per cent —					— per cent—		number
Gold Coast SA4	9.6	11.2	8.4	7.1	9.2	23.0	12.0	6,123
Broadbeach - Burleigh	9.7	10.9	9.0	6.0	9.5	23.6	11.9	556
Coolangatta	8.3	11.4	8.0	6.5	8.7	23.2	11.0	527
Gold Coast - North	9.7	11.4	7.2	7.7	9.4	21.4	11.6	585
Gold Coast Hinterland	9.1	6.5	6.1	9.5	8.6	19.5	10.4	231
Mudgeeraba - Tallebudgera	8.6	9.3	8.8	8.4	10.0	21.7	11.1	452
Nerang	12.3	11.8	9.0	7.3	9.6	23.9	13.3	883
Ormeau - Oxenford	8.7	12.0	8.1	5.9	7.7	22.5	11.1	1,577
Robina	11.1	11.3	11.1	7.8	11.5	25.4	14.2	514
Southport	10.5	12.0	9.1	9.0	11.6	26.9	13.9	534
Surfers Paradise	6.4	9.8	5.7	6.8	7.2	16.7	11.0	264
Queensland	11.6	11.5	9.3	9.1	10.7	26.2	13.8	58,107

Source: Commonwealth Department of Education

1.2.3 Schooling

Gold Coast SA4

- 229,592 persons (or 57.7%) with highest level of schooling of year 11 or 12 (or equivalent)
- Within the region, Robina SA3 had the largest percentage of whose highest level of schooling was year 11 or 12 (or equivalent) with 62.4%
- Within the region, Gold Coast - North SA3 had the largest percentage whose highest level of schooling was year 8 or below (or did not go to school) with 5.5%

Queensland

- 1,836,995 persons (or 55.3%) with highest level of schooling of year 11 or 12 (or equivalent)

Table 15: Gold Coast schools by state and non-state and type of school (2015)

	P-12	Primary	Secondary	Total
State	2	47	15	64
Non-state	20	9	5	34

Source: Queensland Government, Department of Education and Training, Schools Directory. <https://schoolsdirectory.eq.edu.au/>

1.2.4 Persons with a profound or severe disability

Persons with a profound or severe disability has been derived from the 2011 Census of Population and Housing variable 'Core activity need for assistance'. Persons with a profound or severe disability are defined as needing help or assistance in one or more of the three core activity areas of self-care, mobility and communication because of a long term health condition (six months or more), a disability (lasting six months or more), or old age. This is based on persons by place of usual residence.

Gold Coast SA4

- 21,124 persons (or 4.2%) in need of assistance with a profound or severe disability
- Within the region, Gold Coast - North SA3 had the highest percentage of persons in need of assistance with a profound or severe disability with 5.6%
- Within the region, Ormeau - Oxenford SA3 had the lowest percentage of persons in need of assistance with a profound or severe disability with 3.2%

Queensland

- 192,019 persons (or 4.4%) in need of assistance with a profound or severe disability

Table 16: Need for assistance with a profound or severe disability by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Need for assistance		No need for assistance		Total ^(a)
	number	%	number	%	number
Gold Coast SA4	21,124	4.2	452,020	89.0	507,64
Broadbeach - Burleigh	2,367	4.1	50,514	87.2	57,921
Coolangatta	2,230	4.5	44,650	89.1	50,098
Gold Coast - North	3,364	5.6	52,112	87.4	59,606
Gold Coast Hinterland	682	4.0	15,642	91.3	17,136
Mudgeeraba - Tallebudgera	1,131	3.6	28,513	91.8	31,074
Nerang	2,468	3.9	56,548	90.2	62,674
Ormeau - Oxenford	3,045	3.2	86,185	91.6	94,057
Robina	1,903	4.2	40,311	89.2	45,192
Southport	2,734	5.0	47,577	87.2	54,548
Surfers Paradise	1,195	3.4	29,963	84.8	35,329
Queensland	192,019	4.4	3,880,396	89.6	4,332,738

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B18 (usual residence)

(a) Includes need of assistance not stated.

1.2.5 Voluntary work

Voluntary work undertaken for an organisation or group has been derived from the 2011 Census of Population and Housing question *'In the last twelve months did the person spend any time doing voluntary work through an organisation or group?'* The variable is based on persons aged 15 years and over by place of usual residence.

Gold Coast SA4

- 62,614 persons (or 15.2%) undertook voluntary work
- Within the region, Gold Coast Hinterland SA3 had the largest percentage of persons who undertook voluntary work with 23.0%

Queensland

- 645,543 persons (or 18.7%) undertook voluntary work

1.2.6 The Index of Relative Socio-Economic Disadvantage

Socio-Economic Indexes for Areas (SEIFA) is a summary measure of the social and economic conditions of geographic areas across Australia. SEIFA comprises a number of indexes, which is generated by ABS from the Census of Population and Housing. In 2011 an Index of Relative Socio-Economic Disadvantage was produced, ranking geographical areas in terms of their relative socio-economic disadvantage. The index focuses on low-income earners, relatively lower education attainment, high unemployment and dwellings without motor vehicles. Low index values represent areas of most disadvantage and high values represent areas of least disadvantage. This is based on persons by place of usual residence.

Gold Coast SA4

- 13.7% in least disadvantaged quintile
- 11.5% in most disadvantaged quintile
- Within the region, Mudgeeraba - Tallebudgera SA3 had the largest percentage of persons in the least disadvantaged quintile with 30.0%

Queensland

- 20.0% in least disadvantaged quintile
- 20.0% in most disadvantaged quintile

Table 17: Population by Index of Relative Socio-Economic Disadvantage quintiles by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Quintile 1 (most disadvantaged)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (least disadvantaged)
	— % —				
Gold Coast SA4	11.5	19.9	26.1	28.9	13.7
Broadbeach - Burleigh	5.6	17.0	30.8	42.4	4.2
Coolangatta	15.9	26.4	32.3	19.4	6.0
Gold Coast - North	23.6	29.0	21.5	15.5	10.4
Gold Coast Hinterland	1.6	11.9	45.4	39.1	2.1
Mudgeeraba - Tallebudgera	4.1	12.6	16.6	36.8	30.0
Nerang	10.4	18.6	23.6	35.9	11.4
Ormeau - Oxenford	3.6	17.3	22.4	29.6	27.1
Robina	3.7	16.0	36.9	31.8	11.6
Southport	28.4	20.4	24.7	20.3	6.2
Surfers Paradise	11.8	23.2	19.0	25.8	20.2
Queensland	20.0	20.0	20.0	20.0	20.0

Source: ABS 2033.0.55.001, Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia - Data only, 2011, (Queensland Treasury derived)

1.2.7 Total family income

Low-income families have been defined as families in occupied private dwellings whose family income was less than \$600 per week or less than \$31,200 per year.

Gold Coast SA4

- 18,333 low-income families (13.5%)
- Median total family income of \$71,604 per year
- Within the region, Ormeau - Oxenford SA3 had the highest median total family income with \$82,160 per year
- Within the region, Gold Coast - North SA3 had the lowest median total family income with \$62,140 per year

Queensland

- 149,707 low-income families (13.0%)
- Median total family income of \$75,556 per year

Table 18: Total family income by SA3, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	Less than \$31,200 per year		\$31,200 to \$77,999 per year		\$78,000 to \$155,999 per year		\$156,000 or more per year		Total ^(a)	Median (\$/year)
	number	%	number	%	number	%	number	%	number	\$
Gold Coast SA4	18,333	13.5	48,086	35.4	42,123	31.0	12,412	9.1	135,875	71,604
Broadbeach - Burleigh	2,062	13.9	5,240	35.2	4,393	29.6	1,497	10.1	14,866	70,512
Coolangatta	1,975	14.8	5,077	38.1	3,771	28.3	941	7.1	13,321	65,728
Gold Coast - North	2,661	16.4	6,328	38.9	4,244	26.1	1,293	7.9	16,266	62,140
Gold Coast Hinterland	715	14.5	1,770	36.0	1,472	29.9	362	7.4	4,922	68,328
Mudgeeraba - Tallebudgera	1,002	11.5	2,954	34.0	2,905	33.4	863	9.9	8,685	76,492
Nerang	2,135	12.4	6,053	35.2	5,848	34.0	1,307	7.6	17,191	73,788
Ormeau - Oxenford	2,846	10.8	8,290	31.5	9,486	36.0	2,935	11.1	26,354	82,160
Robina	1,673	13.7	4,436	36.4	3,798	31.1	1,052	8.6	12,201	70,304
Southport	2,089	15.4	5,136	37.8	3,810	28.0	1,019	7.5	13,587	65,468
Surfers Paradise	1,179	13.9	2,806	33.1	2,397	28.3	1,135	13.4	8,470	73,580
Queensland	149,707	13.0	373,050	32.5	363,201	31.6	125,205	10.9	1,148,178	75,556

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B02 and B26

Refer to explanatory notes for additional information.

(a) Includes partially stated and not stated income responses.

1.2.8 Employment by industry

Gold Coast SA4

- 12.3% of employed persons worked in retail trade industry
- 11.3% of employed persons worked in construction industry
- Highest specialisation ratio of 2.10 in arts and recreation services industry

Queensland

- 11.9% of employed persons worked in health care and social assistance industry
- 10.7% of employed persons worked in retail trade industry

Table 19: Employment by industry, Gold Coast SA4 and Queensland (2011)

Industry	Gold Coast SA4		Queensland		Specialisation ratio
	number	%	number	%	number
Agriculture, forestry and fishing	1,052	0.4	55,416	2.7	0.16
Mining	1,692	0.7	52,955	2.6	0.27
Manufacturing	17,960	7.6	171,669	8.4	0.90
Electricity, gas, water and waste services	1,806	0.8	24,828	1.2	0.62
Construction	26,841	11.3	183,780	9.0	1.25
Wholesale trade	8,830	3.7	74,288	3.6	1.02
Retail trade	29,175	12.3	217,610	10.7	1.15
Accommodation and food services	22,874	9.6	141,855	7.0	1.38
Transport, postal and warehousing	9,177	3.9	107,072	5.3	0.74
Information media and telecommunications	4,010	1.7	25,358	1.2	1.36
Financial and insurance services	6,629	2.8	54,153	2.7	1.05
Rental, hiring and real estate services	6,492	2.7	37,007	1.8	1.51
Professional, scientific and technical services	14,994	6.3	132,754	6.5	0.97
Administrative and support services	9,427	4.0	65,015	3.2	1.24
Public administration and safety	10,366	4.4	136,818	6.7	0.65
Education and training	17,057	7.2	160,921	7.9	0.91
Health care and social assistance	26,355	11.1	242,559	11.9	0.93
Arts and recreation services	6,978	2.9	28,444	1.4	2.10
Other services	9,635	4.1	78,713	3.9	1.05
Total^(a)	237,688	100.0	2,039,275	100.0	1.00

Source: ABS, Census of Population and Housing, 2011, Basic Community Profile - B43 (usual residence)
Refer to explanatory notes for additional information.
(a) Includes inadequately described and not stated responses.

1.2.9 Unemployment and labour force

Estimates of unemployment and labour force are produced by the Australian Government Department of Employment. The estimates are calculated by utilising administrative data such as Centrelink, Newstart and Youth Allowance (Other) recipients as well as ABS labour force estimates.

Gold Coast SA4

- 18,139 unemployed persons in March quarter 2015
- Unemployment rate of 5.8%
- Within the region, Southport SA3 had the highest unemployment rate of 7.5%
- Within the region, Mudgeeraba - Tallebudgera SA3 had the lowest unemployment rate of 4.3%

Queensland

- 161,680 unemployed persons in March quarter 2015
- Unemployment rate of 6.5%

Table 20: Unemployment and labour force (a) by SA3, Gold Coast SA4 and Queensland (2015)

SA4 / SA3 / State	Unemployed	Labour force	Unemployment rate
	— number —		%
Gold Coast SA4	18,139	310,985	5.8
Broadbeach - Burleigh	2,061	36,751	5.6
Coolangatta	2,037	29,145	7.0
Gold Coast - North	2,511	34,627	7.3
Gold Coast Hinterland	518	9,731	5.3
Mudgeeraba - Tallebudgera	803	18,562	4.3
Nerang	2,260	38,518	5.9
Ormeau - Oxenford	2,706	60,114	4.5
Robina	1,366	27,397	5.0
Southport	2,435	32,680	7.5
Surfers Paradise	1,442	23,460	6.1
Queensland	161,680	2,491,881	6.5

Source: Australian Government Department of Employment, Small Area Labour Markets Australia, various editions
Refer to explanatory notes for additional information.
(a) Based on a 4-quarter smoothed series.

1.2.10 Families with children with no parent employed

Gold Coast SA4

- 6,805 families with children under 15 years of age and no parent employed (13.1%)
- Within the region, Southport SA3 had the highest percentage of families with no parent employed (16.8%)

Queensland

- 62,171 families with children under 15 years of age and no parent employed (13.5%)

Table 21: Families with children with no parent employed, Gold Coast SA4 and Queensland (2011)

SA4 / SA3 / State	One-parent family with parent not employed	Couple family with both parents not employed	Total families with no parent employed	Total families	
	— number —		num	number	
Gold Coast SA4	4,890	1,915	6,805	13.1	51,985
Broadbeach - Burleigh	419	145	564	11.9	4,754
Coolangatta	530	174	704	14.8	4,747
Gold Coast - North	617	246	863	16.4	5,274
Gold Coast Hinterland	141	72	213	11.9	1,787
Mudgeeraba - Tallebudgera	295	103	398	10.1	3,935
Nerang	680	245	925	12.5	7,421
Ormeau - Oxenford	959	373	1,332	10.9	12,176
Robina	437	182	619	13.2	4,679
Southport	574	253	827	16.8	4,932
Surfers Paradise	238	122	360	15.8	2,280
Queensland	44,970	17,201	62,171	13.5	459,205

Source: ABS, Census of Population and Housing, 2011, unpublished data (families)

1.2.11 Domestic and Family Violence

For 2013-2014, the Gold Coast had a rate of 470 applications for domestic violence orders per 100,000 persons². Also during this period, the Southport Magistrates Court recorded the highest number of temporary protection orders (1,409) and protection orders (1,763) in Queensland³.

2. Health Outcomes

Health outcomes are reported for both the Gold Coast Health Area, as well as local and international comparisons in some cases, to help demonstrate the context of health issues. In some cases, locally and nationally, Gold Coast Health Area may have better than average experiences of health outcomes, however compared to the rest of the world we may still have a long way to go to improve health outcomes.

Table 22: Key indicators of health status, comparison of Queensland with Australia and Australia with Organisation for Economic Cooperation and Development (OECD) countries (2009-13) ⁴

Key indicators of health status, comparison of Queensland with Australia and Australia with OECD			
Health status	GCHHS relative to Qld	Queensland relative to Australia	Australia relative to OECD
Median age of death 2011	+1 years	-1.2 years	n/a
Median age of death (Indigenous) 2011	+8 years		
-males		+1.9 years	n/a
-females		+0.5 years	n/a
Avoidable death rate (2009-2011)	21% lower	7% higher	n/a
CVD death rate 2010	18% lower	5% higher	3rd lowest of 33 countries
Cancer death rate 2010	12% lower	similar	10th lowest of 33 countries
Injury death rate 2010	13% lower	9% higher	n/a
Potentially preventable hospitalisation (PPHs) rate 2011-12	20% lower	8% higher	n/a
Smoking (daily) 2010	1% lower	4% higher	3rd lowest of 17 countries
Obesity (adults) 2011-12	16% lower	10% higher	3rd highest of 33 countries
Alcohol consumption (risky lifetime) 2010	same	16% higher	18th highest of 40 countries
BreastScreen participation 2011-2012	7% lower	5% higher	n/a
Immunisation (5-year milestone) 2013	2% lower	0.5% lower	n/a

2.1 Life Expectancy

Life expectancy at birth for Queenslanders continues to increase and reflects declining death rates at all ages. In 2012, Gold Coast had the highest median age of death (81 years); life expectancy at birth for males was 79.6 and 84.0 for females (PHIDU, 2011).

The Gold Coast has the lowest rate of preventable and treatable deaths of all HHS in Qld (2008-2010). Of all deaths, one in five were avoidable, one in ten were treatable and one in ten were preventable. The leading cause of premature death in Australia (YLL) in 2010 was coronary heart disease (15%), lung cancer (6.2%) and stroke (5.6%)⁴

2.2 Deaths and Premature Deaths (ALL)

The number of Potentially Avoidable Deaths GCHHS of Usual Residence, (GAI Filtered, 2009, 2010, 2011) was 1,729 persons. The age specific rates per 100,000 populations were lower than the state average at a ratio of 86.12 as shown in Table 23.

Table 23: Deaths Directly Age Standardised Rate per 100,000 population for selected conditions GCHHS of Usual Residence, GAI Filtered, 2009, 2010, 2011⁵

Condition, GAI	Count	Population	Crude Rate	Age Standardised Rate	Lower Confidence Limit	Upper Confidence Limit
All cause	9307	1557197	597.68	520.93	510.31	531.72
Asthma	16	1557197	1.03	**	**	**
COPD	347	1557197	22.28	19.57	17.55	21.76
Communicable diseases	236	1557197	15.16	13.03	11.41	14.82
Communicable, maternal and neonatal	320	1557197	20.55	18.63	16.62	20.81
Coronary heart disease	1469	1557197	94.34	80.25	76.16	84.49
Diabetes	199	1557197	12.78	11.01	9.52	12.67
Maternal and neonatal conditions	84	1557197	5.39	5.6	4.46	6.94
Non communicable diseases	8337	1557197	535.39	463.16	453.19	473.3
Parkinson's disease	101	1557197	6.49	5.67	4.61	6.91
Pneumonia and influenza	111	1557197	7.13	5.88	4.83	7.09
Road traffic accidents	70	1557197	4.5	4.35	3.38	5.5
Selected chronic conditions	8005	1557197	514.06	445.09	435.3	455.03
Stroke	787	1557197	50.54	42.69	39.74	45.8

2.3 Hospitalisations and Avoidable Hospitalisations (ALL)

In the three year period 2011 to 2014 there were 46,482 potentially preventable hospitalisations (PPH), with a higher number of female (23,882) PPH than male (22,600) PPH.

Females in the Gold Coast Health Area had a higher than Qld age standardised rate of PPH for convulsions and epilepsy, dental conditions, ear nose and throat, gangrene and rheumatic heart disease. All persons PPH were higher in the Gold Coast Health Area for hypertension, iron deficiency anaemia, perforated/bleeding ulcer and urinary tract infection including pyelonephritis as shown in Table 24.

Table 24: Age Standardised Rate per 100,000 populations for Gold Coast Health Area and Queensland Selected Potentially Preventable Hospitalisations Sex, GAI Filtered, 2011/2012, 2012/2013, 2013/2014

Condition	Sex	Gold Coast		Queensland	
		Age standardised rate (& count)	95% CI	Age standardised rate (& count)	95% CI
Angina	Female	121.45 (1218)	(114.61 - 128.59)	175.79 (13423)	(172.79 - 178.83)
	Male	206.04 (1764)	(196.44 - 215.97)	278.61 (19116)	(274.62 - 282.64)
	Person	161.16 (2982)	(155.37 - 167.11)	224.92 (32539)	(222.46 - 227.4)
Asthma	Female	125.6 (1041)	(117.98 - 133.58)	155.78 (10650)	(152.82 - 158.79)
	Male	78.64 (609)	(72.49 - 85.17)	109.76 (7455)	(107.27 - 112.29)
	Person	103.04 (1650)	(98.08 - 108.18)	133.41 (18105)	(131.46 - 135.37)
Bronchiectasis	Female	35.93 (353)	(32.22 - 39.94)	40.38 (3026)	(38.94 - 41.86)
	Male	13.95 (116)	(11.5 - 16.75)	16.56 (1119)	(15.6 - 17.57)
	Person	25.49 (469)	(23.21 - 27.94)	28.94 (4145)	(28.05 - 29.84)
COPD	Female	210.1 (2083)	(201.03 - 219.46)	243.56 (18492)	(240.01 - 247.13)
	Male	232.33 (1982)	(222.12 - 242.89)	324.26 (21661)	(319.9 - 328.67)
	Person	218.07 (4065)	(211.35 - 224.95)	278.41 (40153)	(275.67 - 281.17)
Cellulitis	Female	180.28 (1655)	(171.52 - 189.37)	227.95 (16572)	(224.46 - 231.49)
	Male	282.47 (2290)	(270.94 - 294.36)	334.43 (22621)	(330.06 - 338.85)
	Person	230.41 (3945)	(223.2 - 237.79)	280.27 (39193)	(277.48 - 283.07)
Congestive cardiac failure	Female	132.58 (1461)	(125.71 - 139.72)	171.84 (14243)	(168.97 - 174.74)
	Male	191.34 (1585)	(181.98 - 201.05)	251.76 (16032)	(247.83 - 255.73)
	Person	158.88 (3046)	(153.23 - 164.68)	208.4 (30275)	(206.04 - 210.78)
Convulsions and epilepsy	Female	172.64 (1380)	(163.55 - 182.1)	157.17 (10777)	(154.2 - 160.19)
	Male	167.5 (1338)	(158.6 - 176.77)	192.13 (13148)	(188.85 - 195.46)
	Person	169.25 (2718)	(162.9 - 175.78)	174.25 (23925)	(172.04 - 176.48)
Dental conditions	Female	274.16 (2156)	(262.58 - 286.11)	286.81 (19452)	(282.77 - 290.89)
	Male	247.27 (1916)	(236.28 - 258.64)	273.66 (18740)	(269.74 - 277.63)
	Person	260.98 (4072)	(252.97 - 269.18)	280.1 (38192)	(277.29 - 282.93)
Diabetes complications	Female	367.68 (3541)	(355.43 - 380.23)	494.15 (36593)	(489.04 - 499.3)
	Male	674.35 (5766)	(656.88 - 692.16)	777.01 (53399)	(770.35 - 783.71)
	Person	511.66 (9307)	(501.2 - 522.28)	628.98 (89992)	(624.84 - 633.14)
Ear, nose and throat infections	Female	189.08 (1495)	(179.53 - 199)	194.38 (13217)	(191.07 - 197.74)
	Male	174.5 (1358)	(165.32 - 184.06)	189.03 (13168)	(185.81 - 192.3)
	Person	181.95 (2853)	(175.3 - 188.79)	191.87 (26385)	(189.56 - 194.21)
Gangrene	Female	28.61 (274)	(25.26 - 32.27)	28.08 (2087)	(26.87 - 29.33)
	Male	39.8 (327)	(35.57 - 44.38)	47.79 (3241)	(46.14 - 49.48)
	Person	33.74 (601)	(31.07 - 36.58)	37.45 (5328)	(36.44 - 38.48)
Hypertension	Female	76.66 (783)	(71.29 - 82.34)	59.44 (4546)	(57.7 - 61.22)
	Male	40.69 (349)	(36.49 - 45.24)	37.5 (2582)	(36.05 - 38.99)
	Person	61.05 (1132)	(57.51 - 64.75)	49.74 (7128)	(48.58 - 50.91)
Influenza and pneumonia	Female	43.28 (382)	(38.97 - 47.93)	57.16 (4121)	(55.41 - 58.96)
	Male	44.79 (362)	(40.27 - 49.69)	61.39 (4150)	(59.52 - 63.3)
	Person	43.87 (744)	(40.74 - 47.17)	59.02 (8271)	(57.75 - 60.32)
Iron deficiency anaemia	Female	169.1 (1555)	(160.66 - 177.86)	158.32 (11485)	(155.41 - 161.28)
	Male	119.65 (997)	(112.27 - 127.37)	103.95 (6872)	(101.48 - 106.46)
	Person	144.03 (2552)	(138.44 - 149.79)	130.37 (18357)	(128.48 - 132.29)
Other vaccine-	Female	26.08 (214)	(22.66 - 29.86)	38.7 (2714)	(37.24 - 40.19)

Condition	Sex	Gold Coast		Queensland	
		Age standardised rate (& count)	95% CI	Age standardised rate (& count)	95% CI
preventable conditions	Male	38.62 (317)	(34.46 - 43.15)	48.77 (3474)	(47.15 - 50.43)
	Person	31.99 (531)	(29.31 - 34.86)	43.58 (6188)	(42.49 - 44.68)
Pelvic inflammatory disease	Female	42.29 (343)	(37.91 - 47.03)	52.26 (3489)	(50.54 - 54.03)
	Male	** (0)	(** - **)	** (0)	(** - **)
	Person	21.4 (343)	(19.19 - 23.8)	26.1 (3489)	(25.23 - 26.98)
Perforated/bleeding ulcer	Female	15.49 (155)	(13.1 - 18.18)	14.99 (1147)	(14.13 - 15.9)
	Male	26.34 (218)	(22.93 - 30.1)	26.6 (1780)	(25.36 - 27.88)
	Person	20.52 (373)	(18.47 - 22.74)	20.53 (2927)	(19.79 - 21.29)
Pneumonia (not vaccine-preventable)	Female	8.14 (69)	(6.31 - 10.34)	8.57 (604)	(7.89 - 9.29)
	Male	6.66 (53)	(4.98 - 8.72)	9.14 (619)	(8.43 - 9.89)
	Person	7.42 (122)	(6.15 - 8.88)	8.81 (1223)	(8.32 - 9.32)
Rheumatic heart disease	Female	18.86 (169)	(16.09 - 21.97)	16.57 (1181)	(15.63 - 17.55)
	Male	8.84 (75)	(6.93 - 11.1)	13.78 (930)	(12.9 - 14.7)
	Person	13.99 (244)	(12.28 - 15.88)	15.15 (2111)	(14.51 - 15.82)
Urinary tract infections, including pyelonephritis	Female	443.78 (4111)	(430.01 - 457.87)	428.27 (31581)	(423.5 - 433.08)
	Male	237.24 (1968)	(226.8 - 248.04)	230.71 (15069)	(227 - 234.46)
	Person	342.63 (6079)	(333.97 - 351.46)	329.78 (46650)	(326.78 - 332.81)
Total Chronic	Female	1216.19 (11773)	(1193.87 - 1238.81)	1442.29 (107944)	(1433.58 - 1451.03)
	Male	1487.34 (12575)	(1461.22 - 1513.81)	1784.63 (120514)	(1774.45 - 1794.86)
	Person	1338.56 (24348)	(1321.61 - 1355.67)	1598.89 (228458)	(1592.29 - 1605.52)
Total Acute	Female	1354.48 (11638)	(1329.52 - 1379.78)	1398.37 (98909)	(1389.59 - 1407.19)
	Male	1180.89 (9461)	(1157.08 - 1205.07)	1302.24 (88301)	(1293.61 - 1310.92)
	Person	1267.9 (21099)	(1250.68 - 1285.3)	1348.46 (187210)	(1342.32 - 1354.61)
Total Vaccine Preventable	Female	68.7 (591)	(63.19 - 74.57)	95.55 (6813)	(93.27 - 97.87)
	Male	83.29 (678)	(77.1 - 89.84)	109.78 (7598)	(107.31 - 112.3)
	Person	75.47 (1269)	(71.34 - 79.78)	102.27 (14411)	(100.6 - 103.97)
Total Potentially Preventable Hospitalisations	Female	2626.28 (23882)	(2592.37 - 2660.51)	2913.12 (211983)	(2900.58 - 2925.69)
	Male	2738.06 (22600)	(2702.19 - 2774.27)	3174.32 (214864)	(3160.78 - 3187.9)
	Person	2668.79 (46482)	(2644.3 - 2693.45)	3027.02 (426847)	(3017.88 - 3036.18)

(a) Source: Queensland Hospital Admitted Patient Data Collection (QHAPDC), Queensland Health

(b) Rates are standardised to Australian standard population 2001 using age groups 0-4, 5-9, ..., 85+ per 100,000 population

(c) Separation counts were restricted to Queensland residents only

(d) Separation counts also exclude:

Separations flagged as unqualified newborns, organ donors or boarders, and Admissions to public psychiatric hospitals

(e) Separations where patient sex is indeterminate/intersex are recoded to female

(f) Geographical Area of Interest are Hospital and Health Services: Gold Coast and All Queensland

(g) ** Cell counts are inadequate to produce standardised rates (i.e. less than 20) and related confidence intervals (CIs).

(i) Counts of potentially avoidable hospitalisations were extracted using the Queensland Health Selected PPH definition - please refer to :http://qhasvqhbdcp013/documentation/PPH_definitions.xls

j) Gold Coast Count 823698 females, 796612 males: Qld Count 6866927 female, 6834859 males

3. Health Issues

Chronic diseases are the leading cause of death in Queensland and worldwide and their impact is steadily growing. Chronic disease commonly refers to heart disease, stroke, cancer, diabetes, osteoporosis but as there is not a single definition, measurements and reporting vary⁴.

Chronic disease occurs across different stages of the life, and there are strong links between earlier risk factor exposures and later health outcomes. Today's children, who are subject to increased behavioural risks at earlier ages, such as consumption of energy-dense foods and poor diet, increased screen time and reduced physical activity, will live longer with risk factors such as obesity⁶. Based on current knowledge, the future impact of these behavioural risks on individuals, populations and the health system will be significant.

Cardiovascular disease and cancer are the largest causes of chronic disease death, accounting for about two out of three of these deaths.

Table 25: Gold Coast population, chronic diseases and conditions (modelled estimates) (2011-13)

Chronic Conditions	Gold Coast			Queensland		
	Estimate Number	Estimate Percentage	ASR per 100	Estimate Number	Estimate Percentage	ASR per 100
Diabetes	20,224	4.79%	4.8	169,497	5.07%	5.1
High blood cholesterol	129,156	30.93%	30.9	1,042,054	30.68%	30.7
Mental & behavioural problems	77,913	14.46%	14.5	640,825	14.42%	14.4
Aged 2 years + with circulatory system diseases	98,694	18.62%	18.6	747,828	17.77%	17.8
Hypertensive disease	54,841	10.05%	10.1	436,732	10.14%	10.1
Respiratory system diseases	145,203	26.98%	27	1,209,239	27.15%	27.2
Asthma	51,926	9.68%	9.7	454,312	10.18%	10.2
Chronic obstructive pulmonary disease	14,207	2.62%	2.6	119,481	2.73%	2.7
Musculoskeletal system diseases	145,793	26.84%	26.8	1,186,542	27.16%	27.2
Arthritis	73,586	13.50%	13.5	609,867	14.09%	14.1

Source: Public Health Information Development Unit, University of Adelaide. 2014

3.1 Cardiovascular Disease (CVD)

Cardiovascular disease is the largest cause of death in Queensland and the largest cause of health expenditure. CVD is highly preventable with approximately 67% of CVD death in Qld due to modifiable risk factors⁴. Median age of CVD death of Gold Coast residents was the same as the Queensland average, 84 years.

3.1.1 Heart Disease

Heart disease includes diseases and conditions of the heart and arteries such as coronary heart disease, heart failure, heart attack, arrhythmias, angina, and many others. The most common forms of heart disease result from excess lipids (fats) and cholesterol in the blood stream. The incidence of cardiovascular disease increases with age and the number of people with cardiovascular disease may increase in the future as the number of older Australians increases (AIHW, 2013). Cardiovascular disease is one of the highest causes of illness and death amongst the Gold Coast community. Overall, the rate of CHD episodes of care have trended downward over the ten-year period 2002 to 2012 (Figure 3), however with over 3000 episodes of care in 2013/14, this is still a lot of potentially preventable episodes of care to administer in our hospitals. Males are more likely to require hospital care for CHD than females (Figure 4); however the Gold Coast has one of the lowest age standardised rates of CHD in Queensland⁴. Over 80% of CHD burden is associated with lifestyle and physiological risk factors.

Figure 3: Count and age standardised episodes of care for Coronary Heart Disease GCHHS by year (10 year period: 2002-2014)

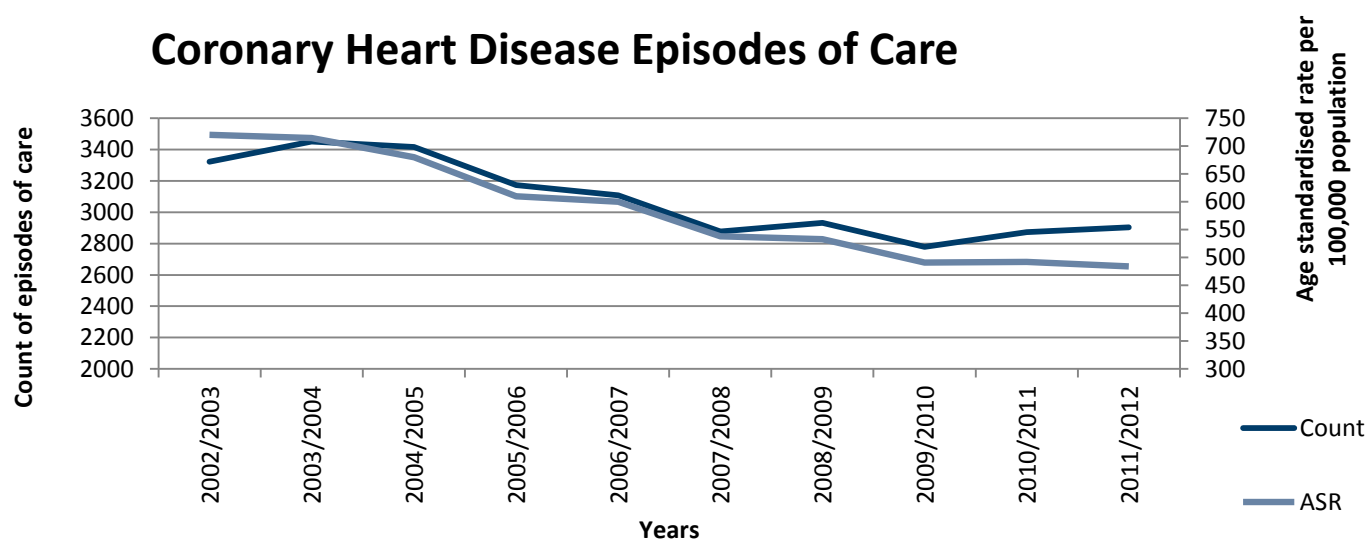
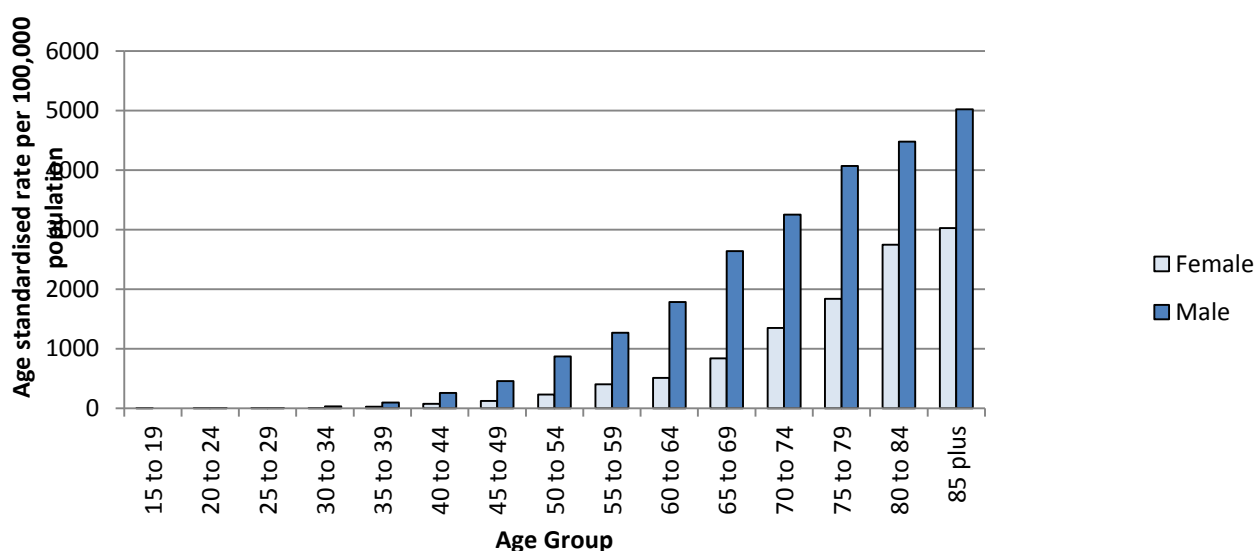


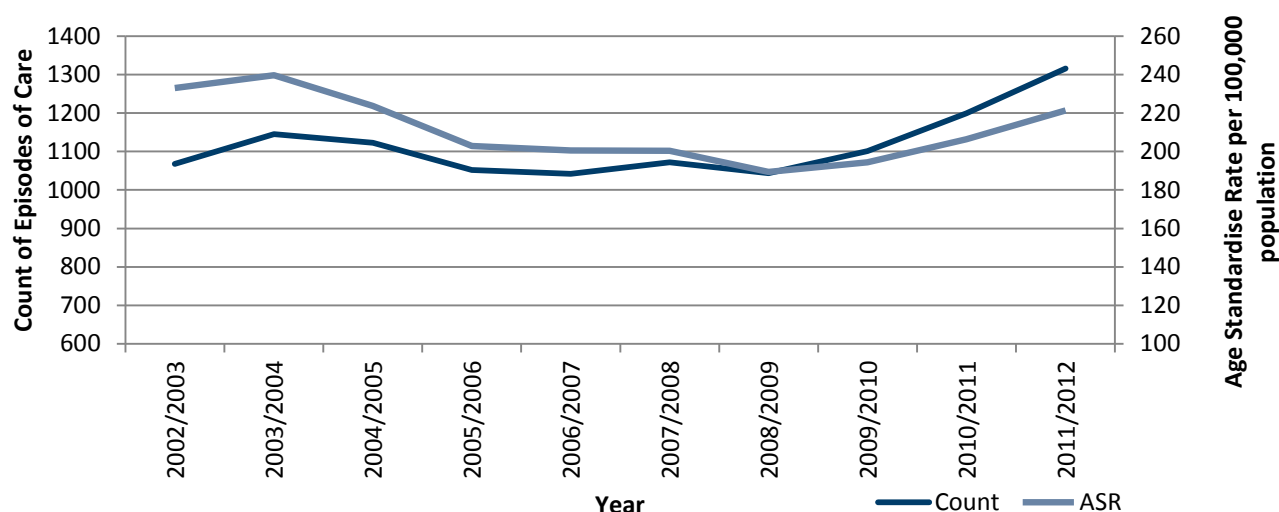
Figure 4: Age standardised episodes of care for Coronary Heart Disease, GCHHS by gender and age group (3 year period: 2011-2014)



3.1.2 Stroke

Over the 10 year period 2002-2012 the age standardise rate of episodes of care for stroke dropped between 2004-2010 and has risen again in recent years (Figure 5). This upwards trend continued in 2013/14 with almost 1500 episodes of care for stroke provided in the Gold Coast Health Area⁷. Stroke hospitalisation rates increase rapidly among the elderly, with rates for those aged 85 and over 5 times as high as those aged 65-74 where stroke is recorded as principle diagnosis (AIHW, 2013). Over 70% of stroke burden is associated with lifestyle and physiological risk factors.

Figure 5: Count and age standardised episodes of care for Stroke GCHHS by year (10 year period: 2002-2014)



3.2 Cancer

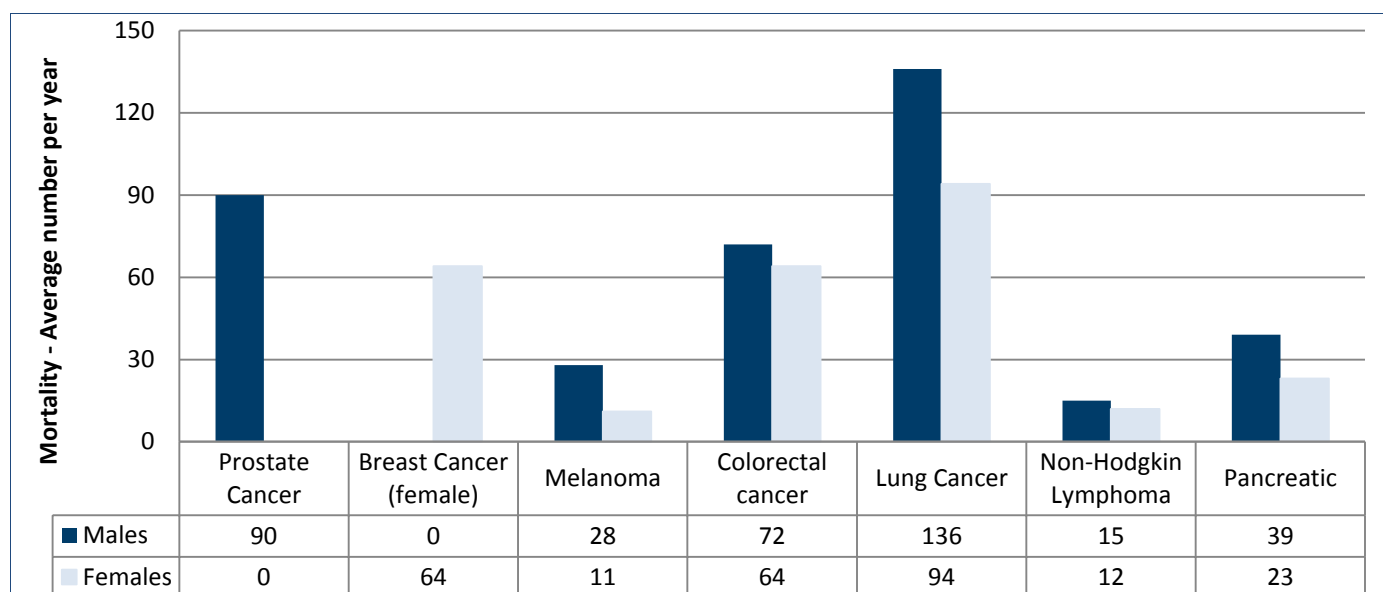
According to the Cancer Council in Queensland, on the Gold Coast prostate cancer remained the most common cancer diagnosis, followed by melanoma between 2010 and 2012 as shown in Table 26⁸.

Table 26 Most common cancer diagnoses: Gold Coast HHS, annual average, 2010-2012

Cancer site	Male	Female	Total
Prostate	481		481
Melanoma	263	177	440
Colorectal	204	174	378
Breast		362	362
Haematological	176	113	289
Lung	148	106	254
Urological	117	43	160
Gynaecological		116	116
Hepatobiliary	69	46	115
Other invasive cancers	63	35	98
Upper GI	63	28	91
Head and neck	67	21	88
Endocrine	11	37	48
CNS and Brain	21	18	39
Bone and soft tissue	18	13	31
Mesothelioma	19	4	23
Merkel	7	3	11
Ophthalmic	3	3	6
All invasive cancers	1731	1298	3030

In 2011, diagnoses were higher than expected average with 3,426 new cases of invasive cancers, with a higher proportion of males (1,969) compared with (1,457 females). There were 1,087 cancer related deaths with 66% before the age of 80. The lowest five-year survival rate is associated with pancreatic cancer at 7%⁹.

Figure 6: Snap shot of cancer mortality in the Gold Coast region (CCQ, 2011)



Annual percentage change (APC) 2001-2012, in age-standardised incidence and mortality rates for males for both prostate (+3%) and melanoma (+4%) has increased significantly, and for females, rates have reduced significantly for both colorectal (-2%) and lung (-2%) cancers.

There is expected to be 4,320 new cases of cancers in 2021 in the Gold Coast HHS which is a 34% increase from 2012. Over 57% of new cancers will be among males, and prostate and breast cancers are expected to remain the most commonly diagnosed cancer in males and females respectively.⁸

In 2021, an estimated 1,435 cancer deaths are expected in the Gold Coast HHS which is a 39% increase from 2012. About 58% of cancer deaths will be among males and lung cancer will continue to be the leading cause of cancer death in both sexes.⁸

Ninety per cent of surgeries for malignant bowel cancer were completed in up to 30 days at the Gold Coast hospital during 2012-13. There were 93 surgeries for malignant bowel cancer performed at the Gold Coast Hospital during 2012-13. Ninety per cent of surgeries for malignant breast cancer were also completed at Robina hospital in up to 30 days. There were 206 surgeries performed at Robina Hospital during 2012-13. Ninety per cent of surgeries for malignant lung cancer were completed in 31 to 45 days at Gold Coast Hospital during 2012-13. There were approximately 10-30 surgeries performed for malignant lung cancer at the Gold Coast hospital during 2012-13. These malignant lung cancer surgeries accounted for 4% of semi-urgent cancer surgeries at the Gold Coast Hospital.

As with chronic diseases, many cancers are associated with lifestyle factors such as poor diet, insufficient physical activity and smoking.

3.3 Diabetes

In Queensland, diabetes was the sixth largest cause of disease burden in 2007, at 7% of total burden and 69% were attributed to modifiable risk factors⁴. In 2011-12 it was estimated that about 1 in 12 adult Queenslanders had diabetes. Type 2 diabetes is the most common (85%), followed by Type 1 (12%) and gestational diabetes (5% of pregnancies). Type 2 diabetes was the third largest specific cause of burden of disease (5.2%), after coronary heart disease, and anxiety and depression.

In 2012-13, diabetes represented 8.9% of all hospitalisations in Australia and was the highest rate of potentially preventable hospitalisations in Queensland⁴.

When interpreting recent hospital separation data for diabetes mellitus, it is important to note that significant changes to clinical coding practices were introduced in 2008/09, with further changes in 2010/11. These changes have resulted in a large decrease in the number of hospital separations recorded for diabetes. This decrease in numbers does not represent a real decrease in diabetes.

Prior to the changes, diabetes hospital separation rates were trending upwards (Figure 8) and it is expected that an upward trend is likely to continue to be observed as more data become available in the future. This upward trend is confirmed by 2013/14⁷ data which reports Gold Coast had 1121 hospital episodes of care for diabetes, which was higher than the count of episodes of care for 2010-2012. GCHHS has the second lowest rate of hospitalisations for diabetes in Queensland⁴. Older males are more likely to require hospital care for diabetes than females (Figure 7).

Figure 7: Count and age standardised episodes of care for Diabetes GCHHS by year (10 year period: 2002-2014)

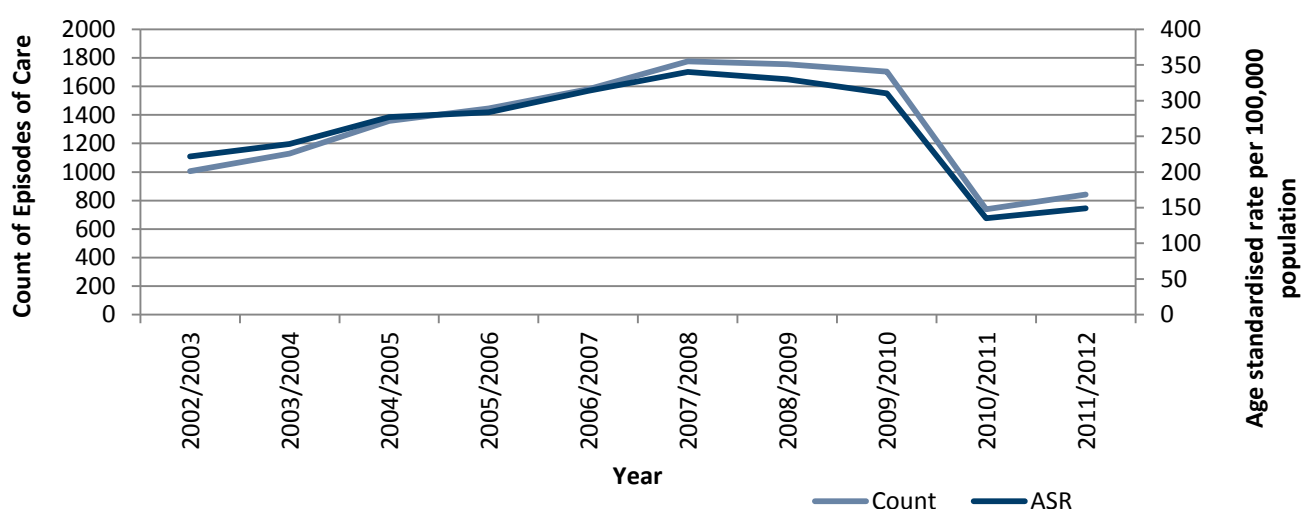
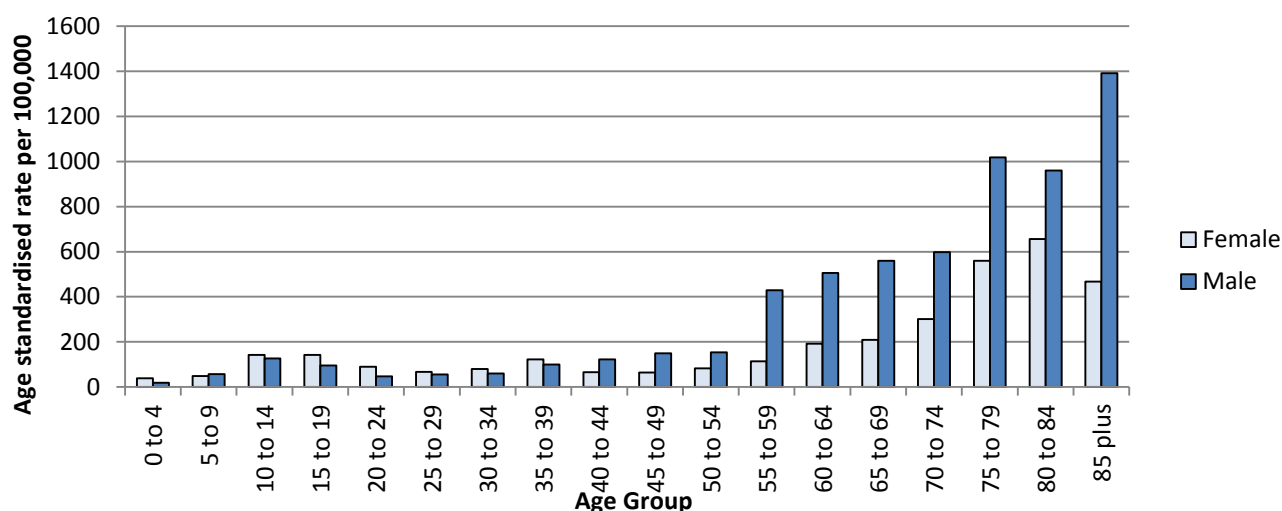


Figure 8: Age standardised episodes of care for Diabetes GCHHS by gender and age group (3 year period: 2011-2014)



3.4 Mental Illness

With respect to clinical treatment services, using the best available Queensland and Australian service utilisation data, it is estimated that 436,000 people, or 49% of all those with a mental or substance use disorder, received treatment in Queensland in 2011-12.

Approximately 74,000 people (17%) were estimated to be treated by public specialised services. Of the remainder, a further 178,000 people (41%) were receiving Medicare subsidised treatment from psychiatrists and allied health professionals and another 134,000 people (31%) received mental health care from a GP only. Small numbers of people were treated by other health services (37,000, or 8%) or under the DVA health service structure (13,000, or 3%). With respect to non-clinical support services, these were provided to an estimated 14% of adults with a severe disorder.

Indicative data suggest that treatment coverage varied considerably according to severity of disorder (94% for people with severe disorders, 64% for people with moderate disorders, and 26% for those with mild disorder); however these estimates should be interpreted with caution given limitations to the available data. Community prevalence and treatment rates for mental and substance use disorders.

Five year trends in treatment data show that treatment rates have been increasing over time, with most of this growth occurring in Commonwealth funded general practitioner, psychiatrist and allied health professional mental health services.¹⁰

For people with multiple co-morbidities, 11% of this group have a mental health and or behavioural disorder as one of these co-morbidities. There is an increasing trend of Drug and Alcohol related presentations to the Gold Coast Emergency Departments. Co-morbid mental health issues constitute a significant proportion of these presentations. Mental disorders was the leading cause group of disease burden in the Aboriginal and Torres Strait Islander population attributing almost one-fifth of the total burden of disease followed by Cardiovascular Disease II, Diabetes, Chronic respiratory disease and cancers respectively which will have a significant impact on both the population and health and welfare expenditure. Multi-morbidity is more common among disadvantaged populations and there is evidence that the number of conditions can be a determinant of a patient's use of health service resources than the specific diseases.

The Gold Coast continues to see an increase in access demand for mental health services in the Emergency department, community and inpatient mental health services. The increase in the amount of drug and alcohol related presentations have increased complexity and acuity levels of the mental health presentations. There has been a significant increase of illicit drug related presentations over the past 18 months.

3.4.1 Hospitalisations

In Queensland, anxiety and depression were attributable for (44%)⁴ of all hospitalisations for mental disorders. This was similar to the proportion of hospitalisations from coronary heart disease.

In 2013/14 a total of 4,491 episodes of care were provided in the GCHA for anxiety and depression, schizophrenia and personality disorders.⁷

In 2013/14 a total of 4,515 episodes of care were provided through in the GCHA for anxiety and depression, schizophrenia and personality disorders. In 2013/14 the age standardised rate for anxiety and depression (559/100,000) was the higher than the rate in any period 2002-2012 (Figure 9) and similarly the rate for schizophrenia (208/100,000) was higher than previous years (Figure 10).

Figure 9: Anxiety and depression episodes of care, GCHHS for all persons over the 10 years (2002-2012)

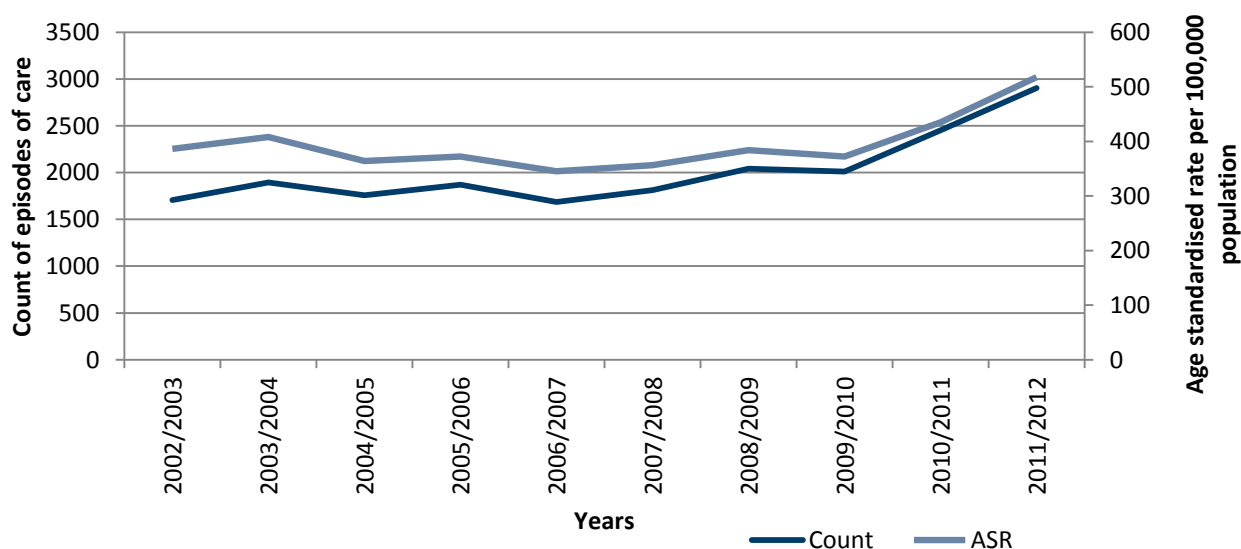
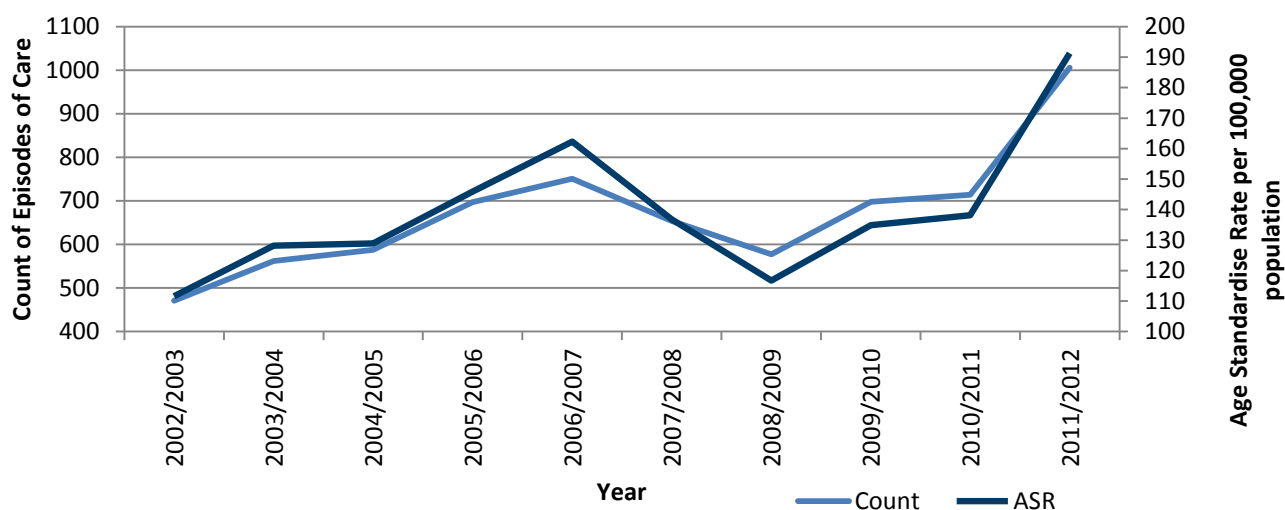
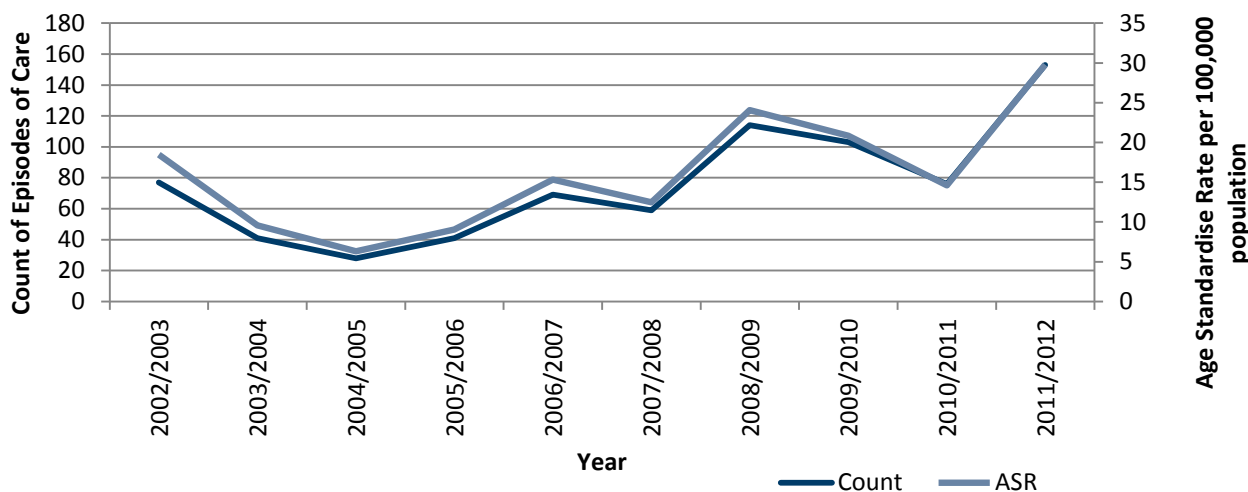


Figure 10: Schizophrenia episodes of care, GCHHS for all persons over the 10 years (2002-2012)



The 2013/14 age standardised rate for personality disorders (25/100,000) was not as high as the rate in 2011/12 (Figure 11) but remains higher than the majority of the ten years 2002-2012.

Figure 11: Personality disorder episodes of care, GCHHS for all persons over the 10 years (2002-2012)



Median age of patients hospitalised for mental and behavioural disorders in GCHA (2009-2012) was 49 years and females were more likely to access hospital care than males.

3.5 Injury

Injury caused 7% of the total burden of disease in 2007 and 31% was attributed to modifiable risks⁴ (includes intentional and unintentional injury). Falls and road transport injury were responsible for the greatest proportion of the unintentional injury burden. Falls were the largest cause of injury hospitalisation, accounting for 27%, followed by road transport (9%), self-inflicted injury (6%), assaults (5%) and accidental poisoning (2%). Falls in persons aged 65 years and older accounted for 49% of falls related hospital admissions in Queensland⁴.

For the last 4 years (2011/2014) the number of episodes of care for falls at GCHA has been significantly higher (5%) than the Queensland age standardised average⁷. In 2013/14 the age standardised rate for GCHA was 892.6 compared to Queensland age standardise rate of 842.1 (Figure 12) and this was the highest rate since 2002. Falls were most likely to occur in older persons, especially females over 85 years (Figure 13).

Figure 12: Falls related episodes of care for GCHA over 10 years (2002-2012) plus 2013/14 rate for GCHA and Qld.

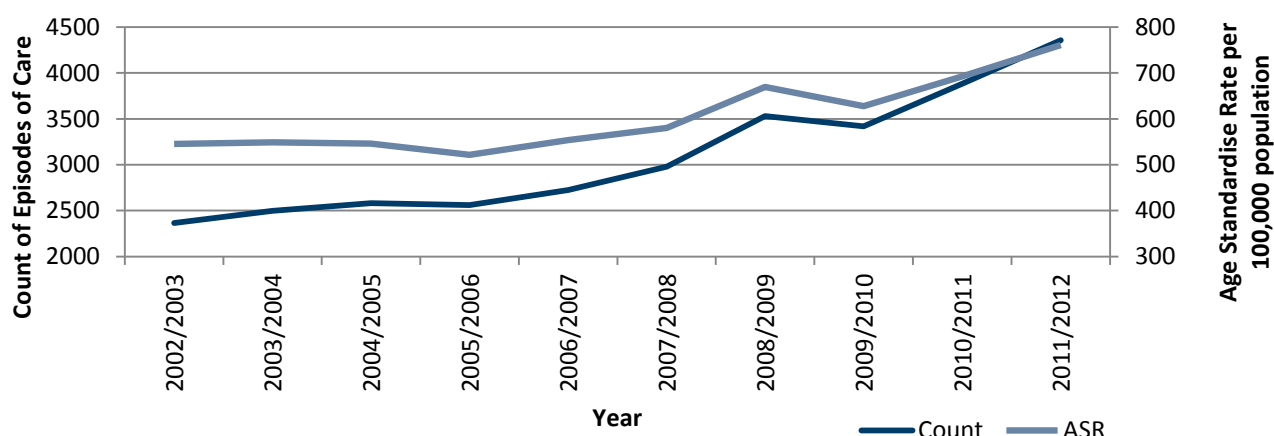
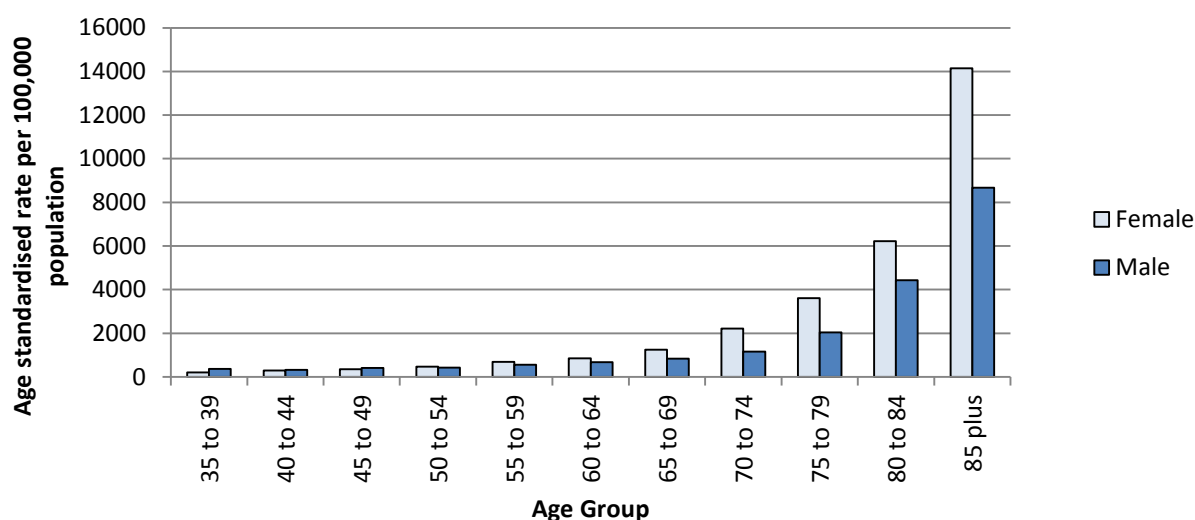


Figure 13: Falls related episodes of care over 3 years (2011-2014)



3.6 Suicide and self-inflicted injury (intentional)

Suicide was the leading cause of death in young people in 2010 and there were a total of 569 suicide deaths (all ages) in Queensland⁴. The median age of death was 44 years.

In 2013/14 a total of 781 episodes of care for suicide and self-inflicted injury were recorded in GCHA, with an age standardised rate of 143/100,000. This rate was higher than the rates for the ten years 2002-2012 (Figure 14). Young females were more likely to receive episodes of care for suicide and self-inflicted injury than males (Figure 15).

Figure 14: Suicide and self-inflicted injury over 10 years (2002-2012)

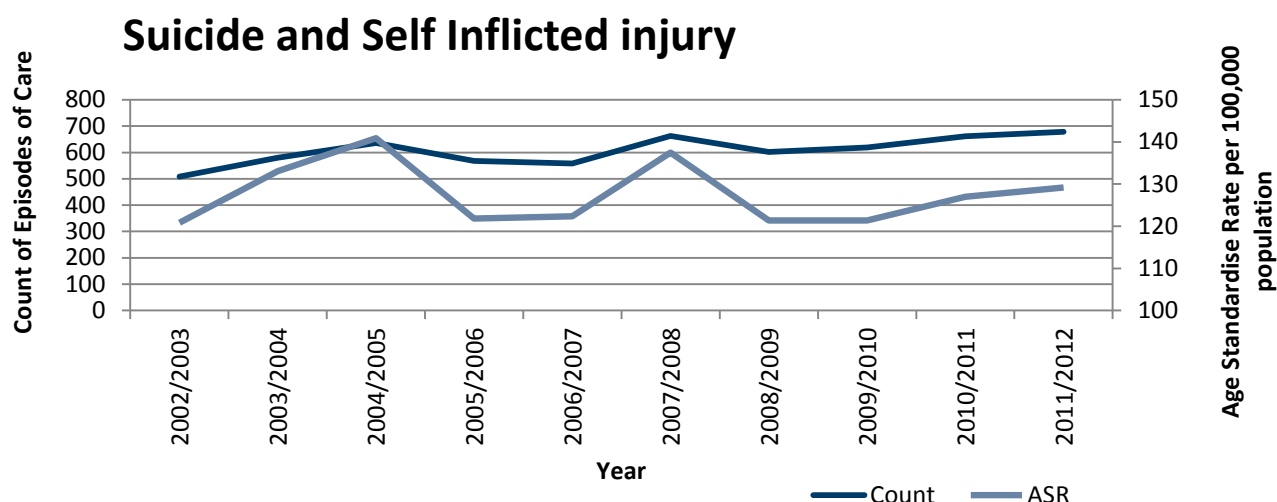
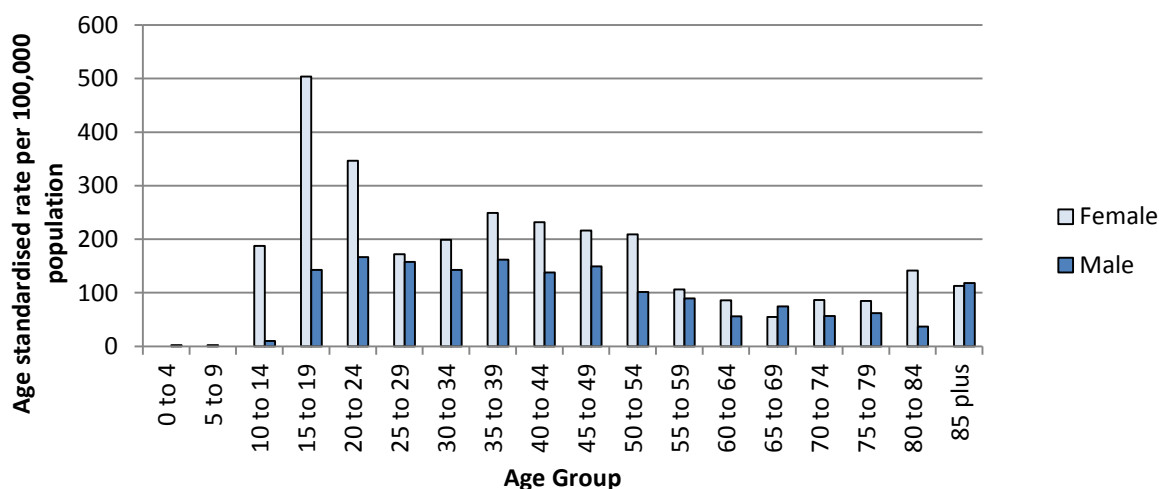


Figure 15: Suicide and self-inflicted injury over 3 years (2011-2014)



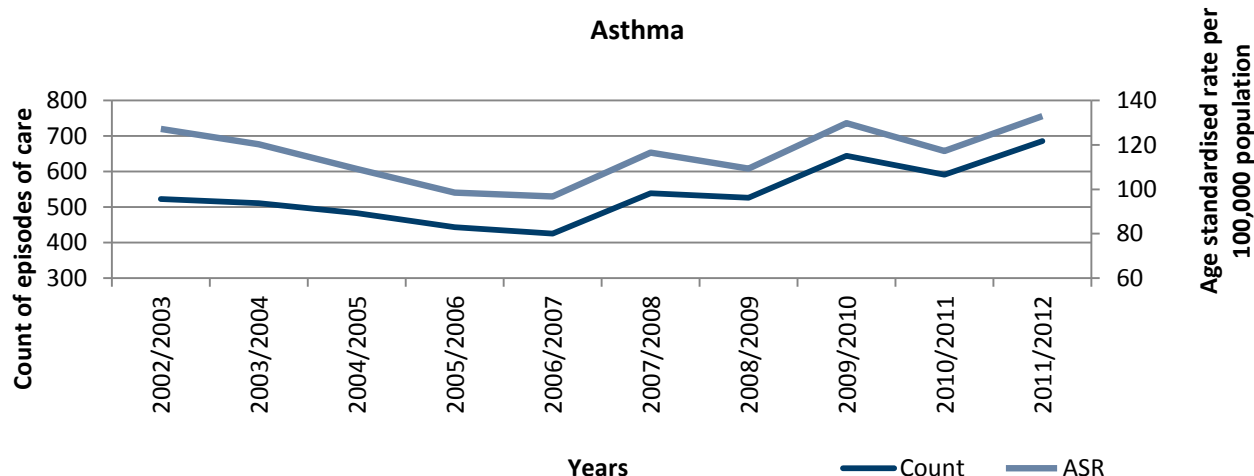
3.7 Respiratory Conditions

In Queensland respiratory conditions were the third largest broad cause of death in 2010 and a major cause of hospitalisations in Queensland⁴. Chronic obstructive pulmonary disease (COPD), influenza and pneumonia, and asthma are the most prevalent chronic respiratory conditions accounting for 70% of respiratory deaths.

In 2013/14 there were 793 Asthma, 1473 COPD and 1579 influenza/pneumonia episodes of care were provided through GCHA⁷. The age standardised rate for each of these was lower than the Queensland age standardised rate.

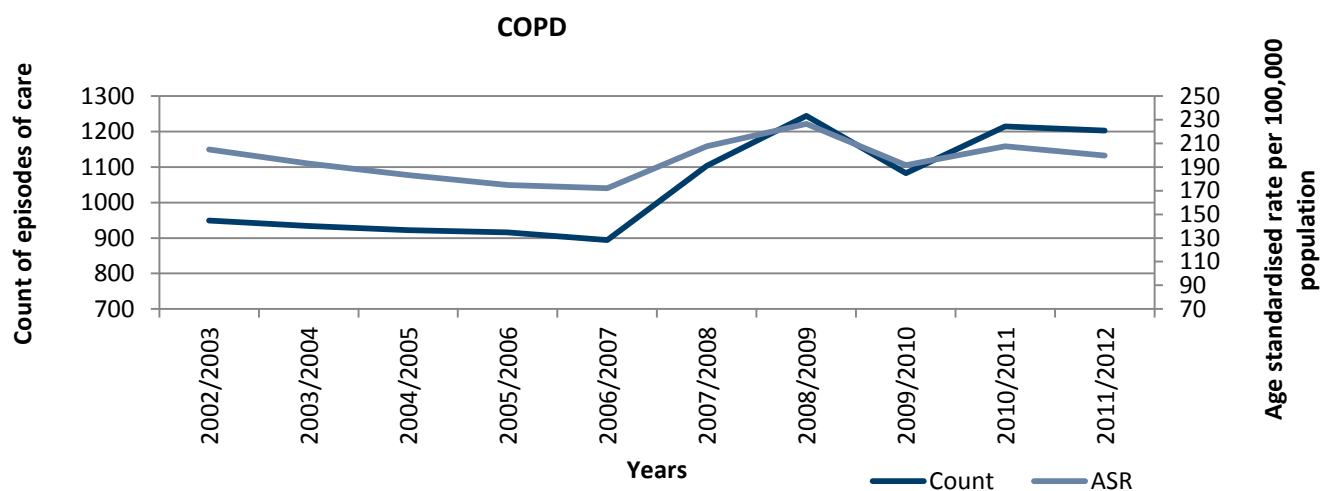
Asthma prevalence in Queensland is similar to national prevalence (10.2%). In 2013/14 the age standardised rate per 100,000 persons was 147 for GCHA which was lower than the Queensland age standardised rate (157). Asthma rates have steadily risen over the last 10 years on the Gold Coast (Figure 16). This is consistent with increases at the state level.

Figure 16: Asthma episodes of care over 10 years (2002-2012)



COPD death rate in Queensland in 2010 was 9% higher than the national rate. GCHA aged standardised rate of episodes of care for COPD fluctuated slightly between 2002 and 2012 (Figure 17). The 2013/14 age standardised rate of COPD for GCHA (230/100,000) was higher than the years 2009-2012 but still low compared to Queensland rate of 266/100,000.

Figure 17: COPD episodes of care over 10 years (2002-2012)



Influenza and pneumonia death rates reduced by 53% from 2001 to 2010⁴. As at July 2015, GCHHS had one of the highest rates of laboratory confirmed influenza notifications (83 per 1000 admissions) compared to other HHS areas in Queensland. This is consistent with 2014 data which also showed GCHHS as the highest admission rate per influenza notification compared to other Queensland HHS's¹¹.

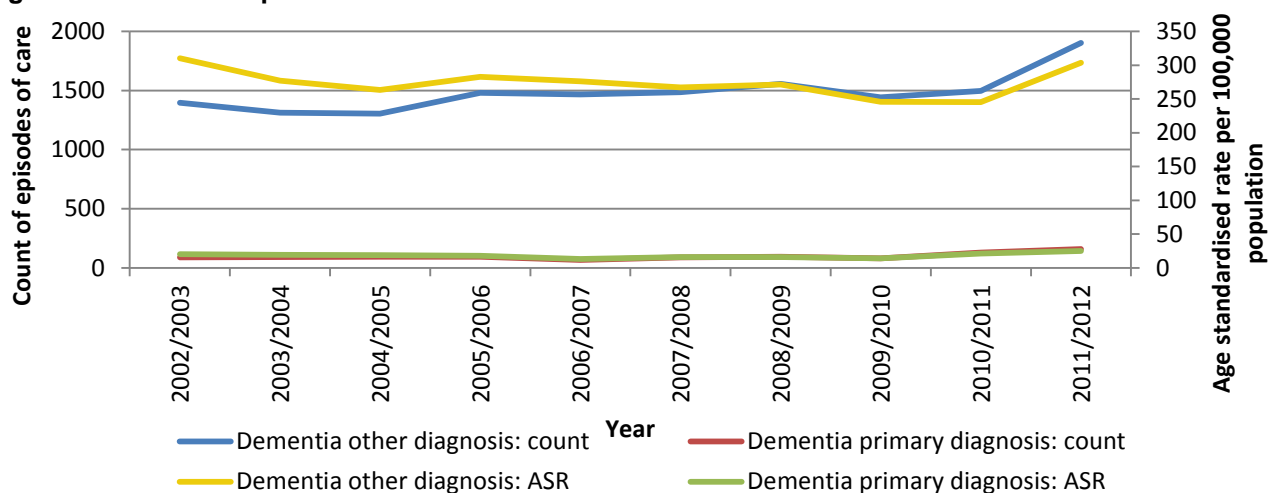
COPD, pneumonia and influenza episodes of care are consistently higher for older persons, in particular older males¹¹.

3.8 Dementia

There is limited data available on dementia prevalence, often because more proximal cause of hospitalisation is recorded, and self-reports are unreliable as a measure. It is estimated that 1.3% of Australians have dementia, which equates to around 7,283 persons within the Gold Coast Health Area. Prevalence of dementia increased from less than 1:10 for under 65 years of age to almost 1:3 for those over 85 years of age. In 2011-12, female prevalence was higher (1.6%) than male prevalence (1.0%) and male hospitalisations rates were 14% higher than female⁴. Age standardised rates of dementia as a primary diagnosis.

In 2013/14 there were 2,637 episodes of care for dementia in the GCHA (222 primary diagnosis, 2415 secondary diagnosis). This was significantly higher (20%) than the Queensland average⁷.

Figure 18: Dementia episodes of care: Gold Coast Health



3.9 Dental Disease

Dental disease is the second largest cost of all disease groups for health expenditure (both private and public) at both the national (\$10.6 billion) and state (\$1.8 billion) level. In 2010-12, 50% of Queensland children had experienced tooth decay. The proportion of Queenslanders experiencing gum disease increases from 12% in those aged 15-34 years to 47% in those aged 55 years or older (2004-06)⁴. About 1 in 3 hospital admissions for dental conditions occurred in infants and young children (0-9 years)⁴.

Just over half the child population (5-14 years of age) of the Gold Coast Health Area had no caries (tooth decay) experience (53.1%). Those who did experience caries (46.9%) were more likely to have seen a public dental service than a private dental service (Table 27). Gold Coast caries experience was lower than the state average (53.2%).

Table 27: Decayed, missing and filled teeth oral health status indicators for Gold Coast Hospital and Health Service area compared with Queensland for children aged 5-14 years by the type of dental service last used (public/private). Queensland Child Oral Health Survey 2010-2012¹²

Outcome	Gold Coast HHS			Qld
	All	Public	Private	
Percentage children with any caries experience (DMFT>0, dmft >0)				
All teeth (DMFT+dmft)	46.9 (40.8-53.1)	50.5 (41.6-59.3)	44.9 (32.5-57.9)	53.2 (50.9-55.4)
Deciduous teeth (dmft)	43.4 (37.8-49.2)	47.7 (35.1 -60.5)	41.1 (27.4-56.4)	49.5 (47.0-51.9)
Permanent teeth (DMFT)	23.7 (16.2-33.4)	25.4 (16.8-36.5)	21.7 (12.1-35.8)	29.5 (27.2-31.9)
Percentage children with severe caries experience (DMFT 4+, dmft 4+)				
All teeth, DMFT+dmft 4+	20.9 (16.4-26.4)	20.3 (14.0-28.6)	20.8 (13.4-31.0)	22.8 (20.9-24.7)
Deciduous teeth, dmft 4+	22.2 (16.6-29.0)	21.6 (13.0-33.7)	25.0 (14.6-39.4)	23.5 (21.5-25.8)
Permanent teeth, DMFT 4+	4.7 (1.8-11.4)	4.2 (1.6-10.4)	4.3 (1.0-16.0)	6.9 (5.7-8.2)
Mean number of decayed, missing and filled teeth				
All teeth, mean dmft+DMFT	1.65 (1.33-1.97)	1.65 (1.29-2.01)	1.65 (1.05-2.26)	2.00 (1.86-2.14)
Deciduous teeth, mean dmft	1.62 (1.32-1.91)	1.61 (1.11-2.11)	1.67 (1.02-2.32)	2.00 (1.83-2.16)
Permanent teeth, mean DMFT	0.59 (0.21-0.96)	0.58 (0.25-0.91)	0.59 (0.7-1.12)	0.73 (0.64-0.82)
Mean number of decayed, missing and filled surfaces				
All teeth, mean dmfs+DMFS	2.90 (2.35-3.46)	2.86 (2.21-3.50)	2.90 (1.86-3.95)	3.65 (3.33-3.96)
Deciduous teeth, mean dmfs	3.28 (2.55-4.00)	3.12 (2.23-4.01)	3.51 (1.87-5.14)	4.14 (3.73-4.55)
Permanent teeth, mean DMFS	0.75 (0.32-1.18)	0.77 (0.41-1.13)	0.72 (0.12-1.32)	1.00 (0.87-1.13)

3.10 Infectious Diseases¹³

The risk of hospitalisation for infectious diseases differs substantially between different patient groups. Infectious disease separation rates are highest in older age groups and for children under 5. Between 2004-05 and 2013-14, infectious disease rates have substantially increased in Queensland hospitals, particularly in public hospitals. Separations for infectious diseases are disproportionately high for Indigenous people and people with low socioeconomic status.

3.11 Communicable Diseases (Notifiable)

Between 2012 and 2014, there was an average of 6,438 notifications of communicable disease reported, per year, in the Gold Coast Health area.

The greatest notification rate (per 100,000 population) was reported for chlamydia (417.3), followed by lab confirmed influenza (349.1), campylobacter (99.8), varicella (96.6) and salmonellosis (86.7). The relative risk of all five conditions in the Gold Coast was significantly lower than the rest of Queensland.

Counts and rates for selected notifiable conditions in the Gold Coast and Queensland are presented in Table 28. In summary, the notification rate of 18 and 8 selected conditions were significantly lower or of no statistically significant difference to Queensland, respectively.

Notification rates of the following selected conditions were significantly lower in the Gold Coast compared to Queensland; influenza, pertussis, varicella, vaccine adverse events, hepatitis C, hepatitis B, campylobacter, Salmonella, rotavirus, cryptosporidiosis, chlamydia, gonorrhoea, Barmah forest virus, Ross River virus, non-TB mycobacteria, pneumococcal, legionella and Q fever.

Gold Coast notifications rates for mumps, measles, rubella, hepatitis A, syphilis, dengue fever, potential rabies/lyssa virus exposure and meningococcal were not significantly different to Queensland.

Table 28 Counts and rates of selected notifiable conditions, Gold Coast Health area and Queensland 2012-14

Condition	Average Annual Notifications (2012-14)			
	No. of notifications (Rate per 100,000 pop)		Gold Coast compared with Queensland	
	Gold Coast HHS	Queensland	Ratio (95% Confidence Interval)	Significant difference (GC v QLD) ¹
<i>Vaccine preventable disease</i>				
Influenza (lab confirmed)	1,218 (349.1)	13,861 (389.0)	0.72 (0.68 - 0.76)	↓
Pertussis [#]	363 (28.9)	4,249 (29.5)	0.70 (0.62 - 0.77)	↓
Varicella	491 (96.6)	5,438 (125.4)	0.74 (0.67 - 0.81)	↓
Vaccine adverse events	29 (8.6)	398 (10.8)	0.59 (0.40 - 0.85)	↓
Mumps	7 (1.2)	41 (1.0)	1.55 (0.69 - 3.49)	–
Measles	<5 (1.2)	44 (1.5)	0.67 (0.23 - 1.95)	–
Rubella	<5 (0.0)	5 (0.0)	1.72 (0.20 - 15.10)	–
<i>Blood borne disease</i>				
Hepatitis C	238 (41.2)	2469 (55.4)	0.79 (0.69 - 0.91)	↓
Hepatitis B	89 (19.1)	950 (22.3)	0.77 (0.62 - 0.96)	↓
<i>Gastrointestinal disease</i>				
Campylobacter	399 (99.8)	4,748 (131.9)	0.68 (0.62 - 0.76)	↓
Salmonellosis	357 (86.7)	3,916 (104.1)	0.81 (0.72 - 0.90)	↓
Rotavirus	92 (15.2)	1,015 (19.4)	0.74 (0.60 - 0.92)	↓
Cryptosporidiosis	75 (17.1)	935 (14.1)	0.65 (0.51 - 0.82)	↓
Hepatitis A	<5 (0.7)	41 (0.9)	0.58 (0.18 - 1.89)	–
<i>Sexually transmitted disease</i>				
Chlamydia	2,168 (417.3)	20,615 (436.5)	0.92 (0.88 - 0.96)	↓
Gonorrhoea	269 (55.9)	2,713 (57.6)	0.82 (0.72 - 0.93)	↓
Syphilis (infectious <2yr duration)	43 (11.6)	371 (8.3)	0.97 (0.71 - 1.34)	–

<i>Arboviral disease</i>				
Ross River Virus	131 (29.8)	2,029 (49.7)	0.51 (0.43 - 0.61)	↓
Barmah Forest Virus*	71 (5.5)	1,226 (10.0)	0.45 (0.36 - 0.58)	↓
Dengue Fever	36 (6.6)	376 (8.3)	0.85 (0.61 - 1.19)	–
<i>Other Disease</i>				
Non-TB Mycobacteria	104 (23.4)	1,100 (29.1)	0.78 (0.63 - 0.95)	↓
Potential Rabies/Lyssa Virus exposure	75 (14.6)	585 (12.7)	1.09 (0.86 - 1.40)	–
Pneumococcal	23 (3.7)	283 (4.9)	0.66 (0.43 - 1.01)	↓
Legionella	9 (0.5)	111 (2.0)	0.65 (0.33 - 1.29)	↓
Q Fever	10 (2.0)	226 (5.1)	0.33 (0.17 - 0.63)	↓
Meningococcal	<5 (0.7)	46 (0.8)	0.65 (0.22 - 1.89)	–

Note 1. GC HHS to rest of QLD is based on relative risk, where

↓ GC HHS statistically significantly lower than QLD;

↑ GC HHS statistically significantly higher than QLD;

– No statistically significant difference between GC HHS and QLD

* Caution should be used when making historical comparisons of BFV cases due to the high number of false positive notifications related to a commercial serology kit.

Caution should be used when interpreting Pertussis notifications due to changes in the notification criteria in 2013

Reference: Queensland Health NOCS database, 19th May 2015

Detailed descriptions of notification rates and trends for selected communicable diseases in the Gold Coast can be accessed from the [Notifiable Disease and Immunisation 2014 report](#)¹⁴.

3.12 Unhealthy Weight

The proportion of Gold Coast adults (18+ years) self-reported in unhealthy weight range (BMI <18.5 or 25+) has risen from 51.2% in 2010, 55.3% in 2011/12 to 57.9% in 2013^{15,16}. Unhealthy weight includes both underweight, overweight and obese.

3.13 Obesity

The prevalence of obesity in Queensland adults and children is the highest in Australia, and Australia is one of the fattest countries in the world. Measured BMI in Queensland showed 30% of adults were obese, whereas self-reported prevalence of obesity in adults was much lower at 23%. Self-reported levels of obesity in the GCHA was 18.6%, however this is also likely to be an underestimate of obesity. While GCHA levels of obesity are better than state averages, based on 2016 population projection figures there will be more than 80,000 adults in the GCHA who are obese and therefore this risk factor remains a significant health issue.

In Queensland 9% of children (5-17 years) were measured as obese and 18% were measured as overweight (2011-12)⁴. Based on 2016 population figures (ERP 5-19 years) this would equate to almost 9,800 obese children and 19,500 overweight children between ages 5-19 on the Gold Coast in 2016.

A US study (2014) estimated that the lifetime medical cost of an obese child who remains obese throughout life, is about 50% higher than the lifetime medical costs of a healthy weight child who gains weight over their lifetime consistent with current weight gain patterns¹⁷.

3.14 Food and Nutrition

While 58% of Queensland adults consumed the recommended daily serves of fruit, very few (9%) consumed the recommended daily serves of vegetables (2014). GCHA adults consumed similar serves of fruit (58%), but fewer vegetables (8%)¹⁸.

A large proportion (36% of adults aged 19 + years and 41% for children 2-18 years) of energy intake was derived from discretionary foods (high in energy with little nutritional value)⁴.

Dietary risks were the fourth largest cause of disability burden in 2010 in Australia after high body mass, drug use and smoking⁴.

3.14.1 Child Nutrition

Almost two thirds (65%) of Queensland children aged 5-17 years (2013) consumed adequate serves of fruit. Lower levels (21% lower) of fruit consumption were seen in disadvantaged areas than advantaged areas⁴. Only 6% consumed adequate serves of vegetables and 8% consumed non-diet soft drink daily.

Primary school aged children (4-13 years) in Queensland derived 40% of their energy from energy-dense, low nutrition foods, described as discretionary foods (2011-12)⁴. The proportion of children who had consumed in the previous 24 hours was high for confectionary (50%), discretionary cereal based products such as cakes, biscuits, pizza, and related foods (70%) and sugary drinks (60%).

3.15 Physical Activity

There is strong evidence that physical activity increases life expectancy irrespective of other socio-demographic risk factors. The evidence is growing to demonstrate the importance of physical activity suggesting that overweight (BMI 25-30) can be a healthy weight where the individual is sufficiently physically active.¹⁹

From 2004 to 2008 the prevalence of sufficient physical activity increased annually by about 7% per year. Since 2009 this has slowed to less than 2% per year. Among 18-75 year olds in Gold Coast HHS, 66% (about persons) achieved five sessions of 30 minutes of moderate or vigorous physical activity weekly, meeting the national physical activity guidelines for health benefit. While this is 13% higher than the state average, there are still over 146,000 adults in the GC Health Area who are not sufficiently active for health benefit. This is more people than the total number of residents of any single local government area in Queensland apart from the 11 largest LGA's (Brisbane, Gold Coast, Moreton Bay, Logan, Sunshine Coast, Townsville, Ipswich, Toowoomba, Cairns, Redland, Mackay).

Results of the 2013 Queensland Child Health Status report revealed approximately half of parents knew the recommendations for children's physical activity (that it should be daily and one hour at minimum). Knowledge of screen-based activity limitation to less than two hours daily was widely recognised by parents (600,000) and was 12% higher among those in major cities compared to those in outer regional areas. Despite this, only one quarter of Queensland parents knew all three recommendations for child physical activity.

3.16 Smoking

Nicotine is the addictive substance that causes smokers to continue their smoking habit. Along with nicotine, smokers inhale about 7,000 other chemicals. These chemicals harm nearly every organ in the body. In 2013, self-reported health survey 12.9% (more than 55,000 adults) in the GC Health Area smoked daily and 6.1% smoked but not daily. Almost one in 10 smokers, smoked in the car (9.3%) and less than 2% smoked frequently in the house.

3.16.1 Smoking during pregnancy.

The percentage of women on the Gold Coast who smoked during pregnancy was 12.6% for all women (2009-2011) and 35% for Aboriginal and Torres Strait Islander women (2007-2011) (Figure 19). This was lower than the national percentage of 13.9% for all women and 51.7% for Aboriginal and Torres Strait Islander women.²⁰

Figure 19: Percentage of women who self-reported having smoked at any time during pregnancy and gave birth; all women (2009-2011) and Aboriginal and Torres Strait Islander women (2007-2011)



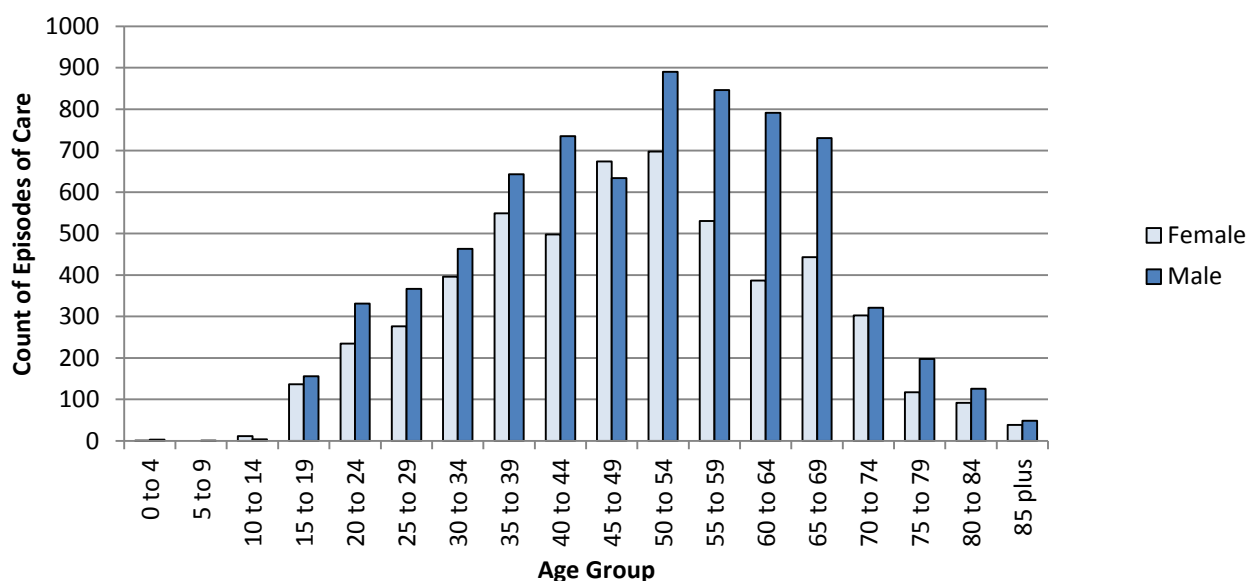
3.17 Alcohol consumption

In Queensland, about half of adults reported drinking at levels that pose risk to their health and 9% consume alcohol on a daily basis. The proportion of adults in the GC Health Area who reported single occasion risk drinking (at least weekly) was similar to the state average (14%).

The proportion of pregnant women abstaining from alcohol rose slightly between 2010 and 2013 (from 49% to 53%) but this increase was not statistically significant. Over 50% of pregnant women consumed alcohol before they knew they were pregnant and 1 in 4 continued to drink, even once they knew they were pregnant. Of those who did consume alcohol, most (96%) usually consumed 1–2 standard drinks.²¹

In 2013/14 there were 4,549 alcohol related episodes of care at GCHHS (Figure 20).

Figure 20: Alcohol related episodes of care over 3 years (2011-14)



3.18 Illicit drug use

Illicit drug use includes use of illegal drugs and the use of pharmaceutical drugs for non-medical purposes as well as inappropriate use of other substances. In 2010, 15% of Queenslanders aged 14 years or older

reported use of an illicit drug in the previous 12 months (higher than national average). The 2013 national drug survey reported declines in the use of ecstasy and heroin and increases in the use of pharmaceuticals.

Young users aged 20-29 years were more likely to use ecstasy, cocaine, meth/amphetamines, hallucinogens and cannabis. Older users were more likely to use cannabis and pharmaceutical drugs⁴.

3.19 Blood pressure and cholesterol

In Queensland in 2011-12, based on physical measurement 30% of adults were hypertensive (male 21% higher than female) and 64% were dyslipidaemic⁴. High blood pressure and high cholesterol are significant contributors to the death burden in Queensland. In 2013, GCHHS population prevalence of high blood pressure (29%) and high cholesterol (27%) was similar to that of the state average¹⁸.

3.20 Sun safety

Gold Coast Health Area residents are just as likely to have been sunburn in the previous year as the state average (54%). There is insufficient data available to assess trends for sunburn and sun protective behaviours at this stage. Melanoma rates in Queensland adults have remained unchanged in recent years⁴.

3.21 Cancer screening

The GCHHS is responsible for meeting targets for our BreastScreen Queensland Gold Coast Service's catchment area which includes all of GCHHS and part of Metro South HHS.

The total participation rate for our Service's catchment (greater than GCHHS) area for women 50-69 years 2012 – 2013 is:

- 55.2% (below state av - 56.9%)
- Expanded target age 70-74 is 50.6% (below state av - 52.7%)
- Total target group participation 50–74 is 54.6% (below state av – 56.3%)

In the biennial period 2011 - 2012, the participation rate in cervical screening for women aged 20 to 69 years within the GCHHS area was 56.7% (above state av - 55.7%).

The participation rate in the Bowel Cancer Screening Program by eligible persons within GCHA has tended to be lower than the state average.

3.22 Immunisation

3.22.1 Child vaccination coverage

Achievement of the National Immunisation Program is measured by vaccination coverage, and is reported at 12, 24 and 60 month milestones (1, 2 and 5 years of age). Health authorities at the national, state and local level aim for vaccination coverage of at least 90%.

Vaccination coverage of 90% was achieved at all milestones in quarters 1 and 3 of 2014 (1 January – 31 March and 1 July – 30 September).

Ninety-percent coverage was not achieved at the 12 month milestone in quarters 2 and 4 (1 April – 30 June and 1 October – 31 December), and at the 24 month milestone in quarter 4.

Low coverage at the 24 month milestone in quarter 4 was potentially attributable to a change in criteria. As of 31 December 2014, the criteria for 'fully immunised' at 24 months was amended to also include dose 2 of measles, mumps and rubella (previously dose 1), dose 1 varicella and dose 1 meningococcal.

Table 29: Vaccination coverage by age cohort, Gold Coast Hospital and Health Service (01/01/2014 - 31/12/2014)

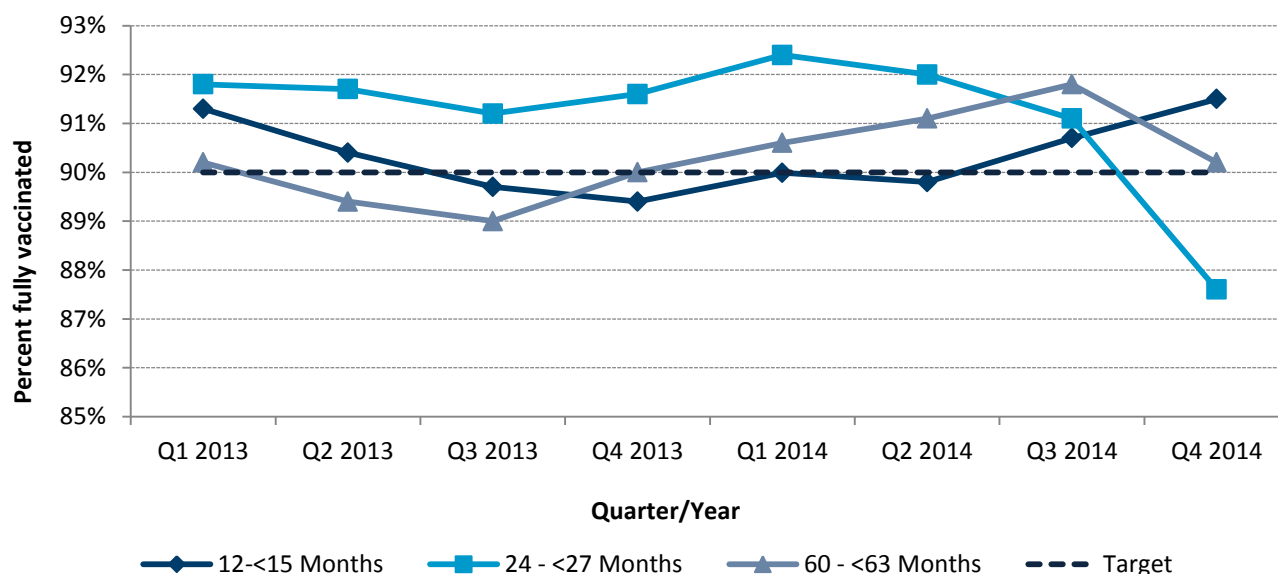
Cohort	12- <15 Months		Cohort 24- <27 Months		60- <63 Months	
	All	Indigenous	All	Indigenous	All	Indigenous
Q1 (2014)	90.0 (1686)	95.0 (40)	92.4 (1627)	95.7 (46)	90.6 (1743)	100.0 (39)
Q2 (2014)	89.9 (1682)	67.6 (34)	92.0 (1708)	94.1 (51)	91.1 (1696)	95.8 (48)
Q3 (2014)	90.7 (1761)	91.1 (37)	91.1 (1732)	95.7 (46)	91.8 (1789)	92.3 (39)
Q4 (2014)	91.5 (1671)	88.6 (35)	87.6 (1740)	88.9 (36)	90.2 (1803)	96.3 (54)

Between 1 January 2013 and 31 December 2014 (two years), vaccination coverage at the 12 month milestone fluctuated between 89.4% and 91.5% (Figure 21). Vaccination coverage trended upward across the 2014 calendar year, and with the exception of quarter 2, remained above the 90% target.

Over the same two year period, vaccination coverage at the 24 month milestone fluctuated between 87.9% and 92.4%. Vaccination coverage maintained above 90% for all quarters with the exception of quarter 4 2014, when it decreased to 87.6%. A change to the 'fully immunised' criteria at 24 months is likely to be attributable for this decrease.

Vaccination coverage fluctuated between 89% and 91.8% at the 60 month milestone. Although since quarter 4 2013, vaccination coverage has remained above 90%.

Figure 21: Time series of vaccination coverage rates for all children by age cohort, Gold Coast Hospital and Health Service (two years: 01/01/2013 – 31/12/2014)

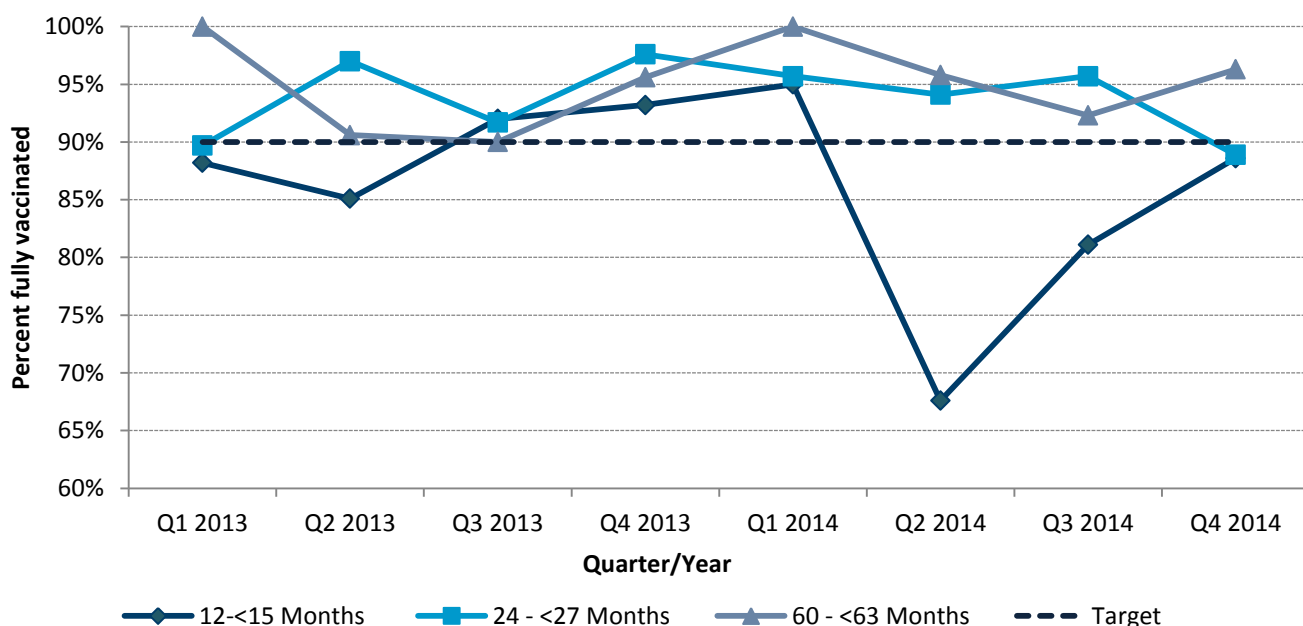


Between 1 January 2013 and 31 December 2014 (two years), vaccination coverage at the 12 month milestone varied considerably, ranging between 67.6% and 95% (Figure 22). By quarter 4 2014, vaccination coverage increased to 88.6%, although this remained below the 90% target. Explanations for these fluctuations are currently being examined to understand factors that may have an impact on vaccination coverage in Indigenous communities.

Vaccination coverage at the 24 month milestone ranged between 88.9% and 97.6% over the same two-year period. With the exception of quarter 1 of 2013 and 2014, vaccination coverage remained above 90%, of which four quarters achieved vaccination coverage above 95%.

Vaccination coverage at the 60 month milestone remained above the 90% target between 1 January 2013 and 31 December 2014, of which three quarters achieved above 95% and two quarters achieved 100% vaccination coverage.

Figure 22: Time series of child vaccination coverage rates for Indigenous children by age cohort, Gold Coast Hospital and Health Service (two years: 01/01/2013 – 31/12/2014)



3.22.2 School vaccination coverage

The following sections describe coverage rates (2014) and vaccination rates over time (2008-14). The former includes students who were previously vaccinated. These vaccinations were often administered in general practice or interstate. The latter only includes students who were vaccinated by the COGC immunisation services within respective vaccination periods; for 2014 this was 1 January to 18 December 2014.

The Gold Coast achieved coverage rates of 75%, 72%, and 59% among year 8 students for doses 1, 2 and 3 of HPV, respectively (Table 30). This was greater than that reported for year 10 students (64%, 57%, and 42%, respectively) (Table 31).

The coverage rate for adolescent diphtheria, tetanus and pertussis was greater among year 8 students than year 10 students (76% compared to 68%, respectively). Due to changes to the immunisation schedule, subsequent annual figures for dTPA coverage will be reported for year 8 students only as of 2016.

A coverage rate of 62% was achieved for the varicella vaccine, of which is only administered to year 8 students.

Table 30: Summary of year 8 consent form return and coverage rate (2014)

Vaccine Type	Total Cohort	Number of forms returned	'Yes' to vaccination	'No' to vaccination	Previously vaccinated	Number Vaccinated	Coverage Rate ¹
HPV 1	6583	5437	4974	463	35	4902	75%
HPV 2	6583	5437	4974	463	35	4698	72%
HPV 3	6583	5437	4974	463	35	3868	59%
dTpa	6583	5392	4993	399	103	4874	76%
V V	6583	5035	3496	1536	689	3414	62%

Table 31: Summary of year 10 consent form return and vaccination coverage (HPV for male students only) (2014)

Vaccine Type	Total Cohort	Number of forms returned	'Yes' to vaccination	'No' to vaccination	Previously vaccinated	Number Vaccinated	Coverage Rate ¹
dTpa	6774	4810	4606	204	72	4514	68%
HPV 1	3512	2354	2238	116	27	2206	64%
HPV 2	3512	2354	2238	116	27	1981	57%
HPV 3	3512	2354	2238	116	27	1441	42%

Note 1: Coverage rate equates to those students previously vaccinated plus the number of students vaccinated in the SBVP of the total cohort.

Note 2: Data collection included school and catch-up clinics held until 18 December 2014.

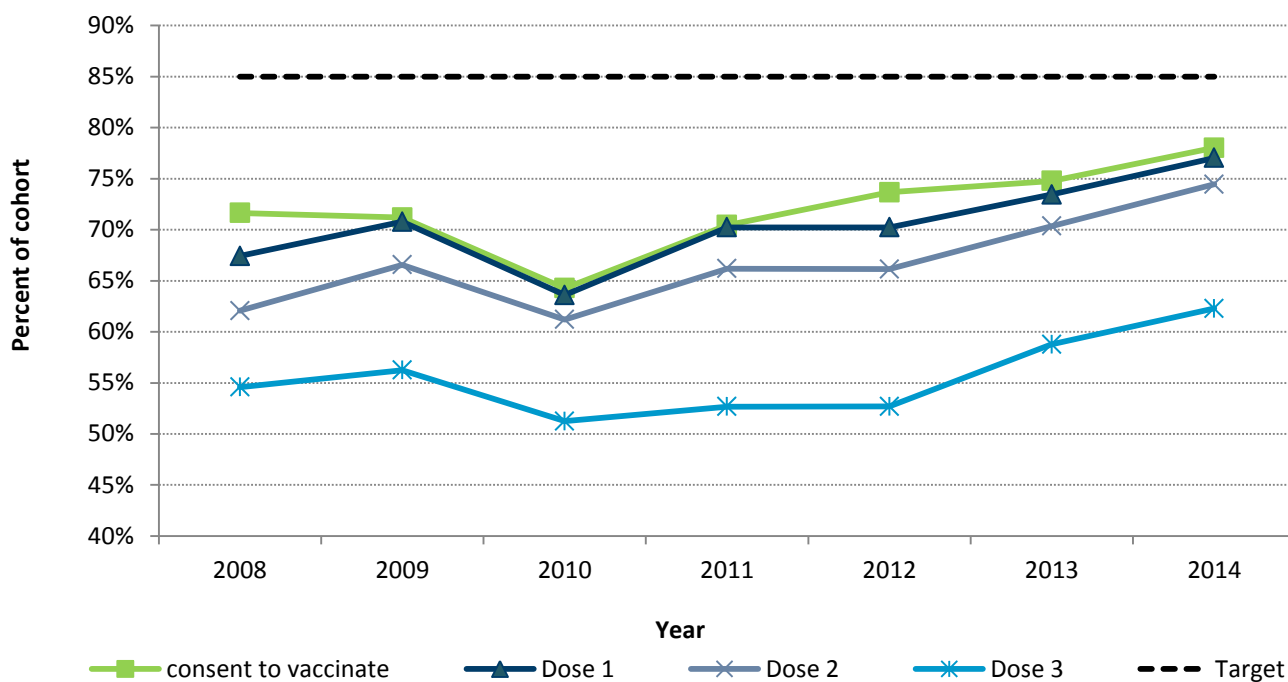
In 2014, a consent form return rate of 85.2% was achieved, of which 78% responded 'yes' to vaccination (Figure 23). This is the highest consent form return rate recorded for the Gold Coast since the initiation of the School Immunisation Project in 2007.

Figure 2324 summarises HPV vaccination coverage, by dose, and consent form return rate in the Gold Coast. Due to a series of changes to vaccination cohorts between 2007 and 2013, including the introduction of the HPV vaccine to year 8 and 10 boys in 2013, figures are only reported for year 8 girls.

HPV vaccination coverage for year 8 girls for the Gold Coast at the end of December 2014 was the highest since inception of the program in 2007. Coverage of 77%, 74% and 62% was achieved at dose 1, 2 and 3, respectively. These figures are the product of a steady increase, across all doses, since 2010. Despite considerable improvements in vaccination coverage, Gold Coast is still under-performing relative to the national target of 85%.

In 2014, an attrition of 2.6% was observed between doses 1 and 2, and 12% between doses 2 and 3 of the HPV vaccination coverage. Since the inception of the program in 2007, attrition has decreased between doses 1 and 2 by 2.8%, although increased by 4.7% between doses 2 and 3.

Figure 23: Time series of HPV vaccination rate, by dose, and consent form return for year 8 girls, Gold Coast Hospital and Health Service (2008-14)



Note 1: Coverage rate equates to the number of children vaccinated in the School Immunisation Program plus the number of students previously vaccinated, of the total eligible cohort.

Note 2: Data includes vaccinations that were administered in schools and catch-up clinics until the 18 December 2014

4. Primary and Community Health Services

4.1 GP Visits

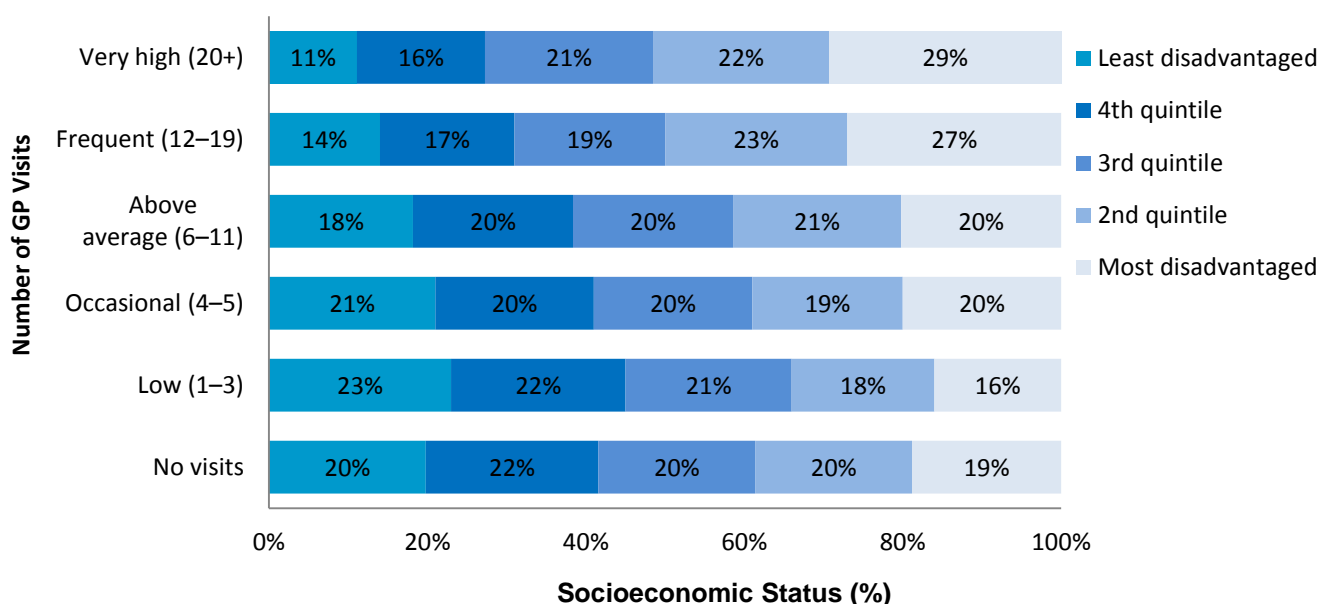
In 2012, 80% of Gold Coast adults reported seeing a GP in the previous year (2010-11). Fifteen percent of these had twelve or more visits to the GP (2012-13), which is classed as 'frequent' (12-19 visits per year) and 'very high' (20+ visits per year) use. GP attendance was seen to increase with age, with the highest percentage of 'very high' users aged 75 and older.²⁴

People who visit the GP more often also tend to see a greater number of different GPs. Those who visit the GP more than 20 times per year see on average 4.8 different GPs, whereas those visiting only 1-3 times per year see 1.5²⁴.

Overall, people attending the GP twelve or more times per year also have more diagnostic imaging services, pathology episodes, medical specialist attendances, GP chronic disease planning and management appointments, and after hours GP attendances. They also have a higher number of visits to emergency departments²⁴.

Socioeconomic status and GP attendance appear to be inversely related, with higher socioeconomic status associated with fewer GP visits (2012-13). Among those who were the most socially disadvantaged were the highest percentages of people who visited the GP 12-9 and 20+ times during 2012-13 (Figure 24).

Figure 24: Socioeconomic status by Number of GP visits (2012-13)



4.1.1 GP visits for Mental Health

General Practitioners (GPs) on the Gold Coast managed depression or anxiety in 7% of consultations during 2009-13. Of these consultations, psychotropics were prescribed in 55%, GPs provided counselling in 31% and provided referrals for specialised care in 16% (2009-13)²².

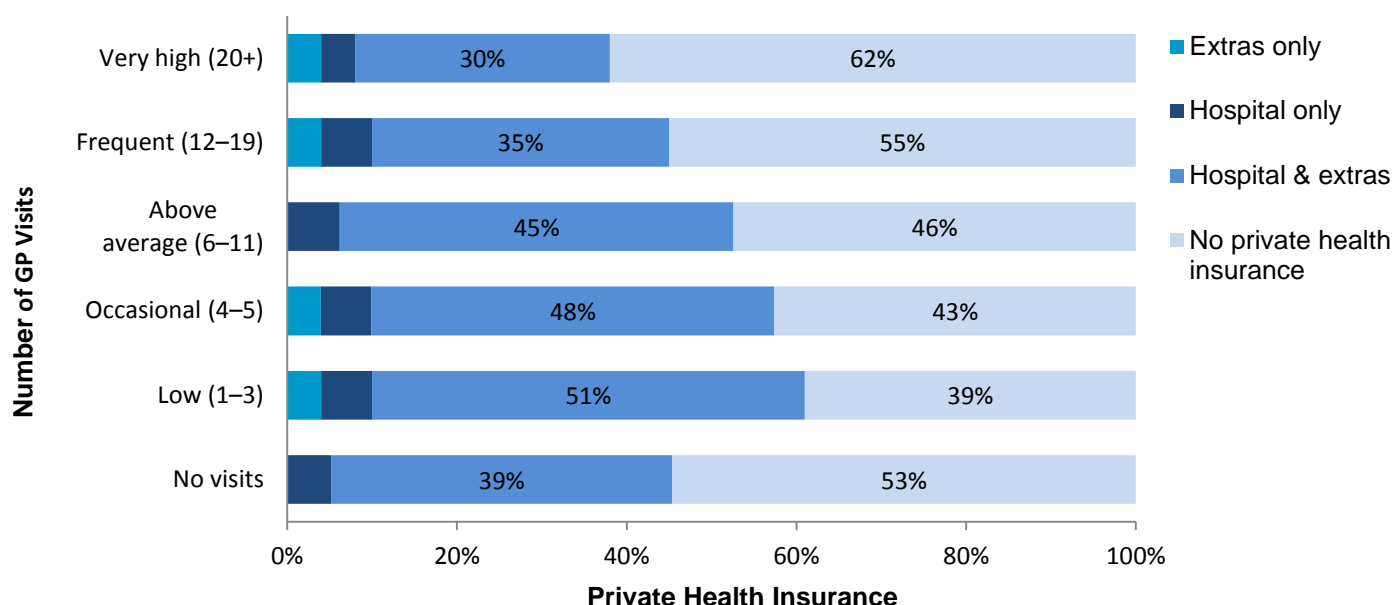
4.2 Access to Private Health Insurance

The percentage of the population with either hospital or general (extras) private health insurance has increased each year from 2012 to 2014 both in Queensland and nationally. This trend continued at a national level from 2014 to 2015. Queensland saw a decline of 0.3 in the percentage of the population with

hospital cover across this period, however general cover increased by 0.2.²³ Current data for local Gold Coast coverage is not available at this time, however historically coverage has been slightly below the state and national levels.

During 2012-13 those who did not have private health insurance were most likely to visit the GP more times per year (6-20+ visits) than those who had private health insurance (Figure 25). Those who had both hospital and extras cover attended the GP less often. However, those with only extras or hospital cover attended the GP the least²⁴.

Figure 25: Self-reported private health insurance coverage by Number of GP visits (2012-13)



4.3 MBS claims per person

From 2012-14, the Gold Coast had more GP attendances per person than both Queensland and Australia. An increase of 0.1 from 4.9 to 5.0 (per person) occurred on the Gold Coast from 2013 to 2014, whereas both Queensland and Australia recorded no growth, remaining at 4.7 (per person) across this period⁸.

Table 32: Chronic disease management claims per person for the Gold Coast (2012 -14)

MBS Item	721 - Attendance by a medical practitioner for the preparation of a GP Management Plan	723 - Attendance by a medical practitioner to coordinate the development of a Team Care Arrangement	732 - Review a GP Management Plan or coordinate a review of Team Care Arrangement
2012	45,115	39,326	50,171
2013	48,053	40,654	63,991
2014	53,143	46,676	76,752

Source: Department of Health, Australian Government. 2015. Medicare Locals Statistical Reports.

The number of GP Management Plans and Team Care Arrangements occurring on the Gold Coast has steadily increased between 2012 and 2014 (Table 32). The minimum claiming period for a review of these plans is three months. The low number of reviews being claimed (item number 732) comparatively to the number of plans and arrangements being prepared indicates some plans are not being reviewed regularly (between 3 and 6 monthly).

4.4 Maternal and Infant Health

Infant mortality rate is an important indicator of the general health and wellbeing of the population and greatly influences the life expectancy of a population. The number of infants and children (Australia and Queensland) who die prematurely has declined in recent years due to improved living conditions and the availability of knowledge and technologies for life saving interventions²⁵. The infant mortality rate for Australia in 2012 was 3.3 infant deaths per 1,000 live births, a decrease on the rate in 2011 (3.8 infant deaths per 1,000 live births). Ten years ago in 2002, the infant mortality rate was 5.0 deaths per 1,000 live births²⁶.

Maternal age is an important predictor of perinatal outcome with adverse outcomes more likely to occur in both younger and older mothers. In 2013, one in five Queensland mothers was aged 35 years or older and almost 1 in 20 aged less than 19 years. Teenage girls and women aged 35 years or older have higher prevalence of pregnancy complications and risks.

In 2011, Gold Coast recorded the lowest total fertility rate 1.84 babies per woman compared with Queensland at 2.08²⁷. There were on average 61,051 babies born to 60,452 mothers each year in Queensland in 2009-2011²⁸. As at 30 June 2014, there were 4,376 babies birthed at Gold Coast Hospitals than in the 2013/14 financial year, an increase of 16% from the previous year²⁹.

4.4.1 Infant and child mortality

In 2010–2012, the rate of infant and young child mortality (aged less than 5 years) for the Gold Coast was 5 deaths per 1,000 live births. This was above the national rate (4.4 per 1,000). Infant mortality (aged less than 1 year) rates were also higher for the Gold Coast with a rate of 4.4 deaths per 1,000 live births compared to the national (3.7 per 1,000) rate²⁰.

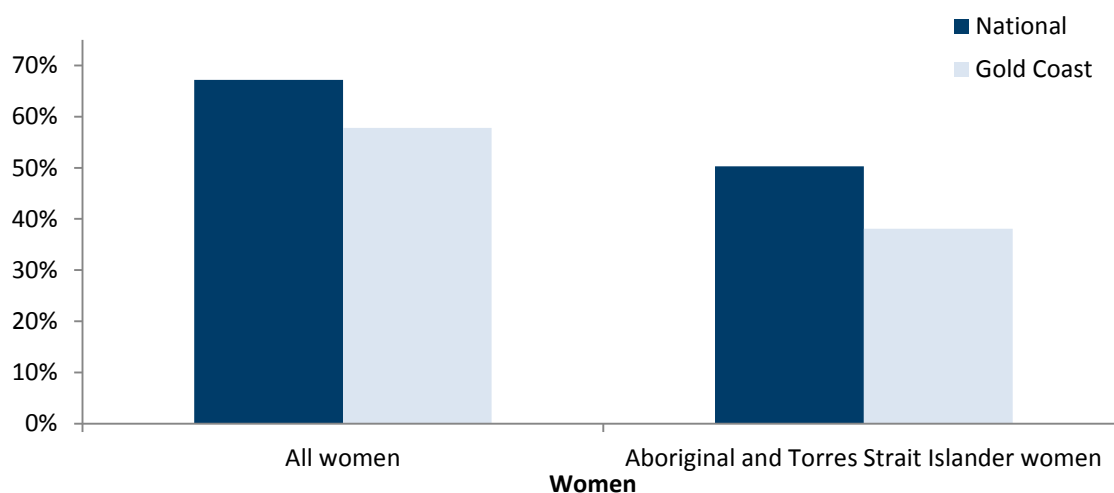
4.4.2 Low birthweight

In 2013, 5.3% of single births and 59% of multiple births born in Queensland were low birthweight (<2,500 grams)³⁰. Gold Coast had a lower percentage (4.2%) of low birthweight babies born to all women in 2009-2011 compared to the national figure (4.8%). This was also true of low birthweight babies born to Aboriginal and Torres Strait Islander women in 2007-2011; Gold Coast (8.3%) and national (11%)²⁰.

4.4.3 Antenatal visits first trimester

In 2010-11, the percentage of women on the Gold Coast who had at least one antenatal visit in the first trimester was 57.8% for all women and 38.1% for Aboriginal and Torres Strait Islander women (Figure 26). This was lower than the national percentages for both all women (67.2%) and Aboriginal and Torres Strait Islander women (50.3%)²⁰.

Figure 26: Percentage of women who gave birth and had at least one antenatal visit in the first trimester (2010-11)



4.4.4 Breastfeeding

Enhanced infant nutrition has resulted from an increase in the rates of initiation and longer duration of breastfeeding as well as lower and later rates of introduction of non-human milk, infant formula and solids⁴. Most Queensland newborns (79%) were exclusively breastfed in the twenty-four hours prior to discharge from hospital (2009-2011)⁴.

4.5 Indigenous Health

There has been an increasing number of Aboriginal and Torres Strait Islander health assessments undertaken on the Gold Coast across the 2012-14 period (Table 33). This is reflective of both state and national trends⁸.

Table 33: MBS 715 by region (2012-14)

MBS Item	Year	Services		
		Gold Coast	QLD	National
715: Aboriginal and Torres Strait Islander Peoples Health Assessment	2012	1275	40769	109849
	2013	1882	48384	135355
	2014	2103	59829	163961
	Total 2012-14	5259	148982	409165

The number of Aboriginal and Torres Strait Islander health assessments provided as healthy kids checks declined from 2012 to 2014 across Gold Coast, Queensland and nationally (Table 34).

Table 34: MBS 10986 by region (2012-14)

MBS Item	Year	Services		
		Gold Coast	QLD	National
10986: Health Assessment provided as a Healthy Kids Check	2012	757	8860	29602
	2013	709	8237	25134
	2014	641	7657	23020
	Total 2012-14	2107	24754	77756

Source: Department of Health, Australian Government. 2015. Medicare Locals Statistical Reports.

From 2012 to 2014 the number of services provided to a person with a chronic disease by a practise nurse or Aboriginal and Torres Strait Islander health practitioner has almost doubled. This is consistent with both state and national trends (Table 35).

Table 35: MBS 10997 by region (2012-14)

MBS Item	Year	Services		
		Gold Coast	QLD	National
10997: Service provided to a person with a chronic disease by a practice nurse or an Aboriginal and Torres Strait Islander health practitioner	2012	15489	128728	594619
	2013	20714	174621	790005
	2014	29653	233365	1062176
	Total 2012-14	65856	536714	2446800

4.6 New Migrants and Refugee Services

From August 2012 to 2015, 202 refugees were settled on the Gold Coast. Of these 104 were female and 98 were male. Most refugees were from an African background 75.2% with the majority being from Eritrea (110 people)³¹.

The most common health concerns experienced by refugees settling on the Gold Coast were low levels of vitamin D and iron, vision and eye damage, poor dental health, regular headaches and torture and trauma related concerns. Other less common conditions included cancer, inactive tuberculosis and HIV³¹.



4.7 Older People and Aged Care Services

4.7.1 Aged care services

Aged care service information is based on the location of the service, rather than the region in which the service is delivered. Users should be aware of this limitation when using these data. Aged care services are subsidised by the Australian Government under the Aged Care Act 1997. Data are updated annually with an approximate delay of 12 months after the reporting period. It is anticipated the next update will be in April 2016.

In 2014 there were 120 aged care services and 6,454 aged care service operational places. Within the region, Robina SA3 had the largest number of aged care service operational places (1,358)¹.

Table 36: Aged care services by SA3, Gold Coast SA4 and Queensland (2014)

SA4 / SA3 / State	Aged care services	Number of operational places by care type				Australian funding(a)
		Community care	Residential aged care	Transition care	Total places	
	number	— number —				\$m
Gold Coast SA4	120	1,797	4,561	96	6,454	275.1
Broadbeach - Burleigh	3	0	363	0	363	20.0
Coolangatta	26	517	337	0	854	31.5
Gold Coast - North	13	50	848	0	898	45.4
Gold Coast Hinterland	1	0	38	0	38	1.9
Mudgeeraba - Tallebudgera	7	62	299	0	361	14.0
Nerang	11	173	251	0	424	13.4
Ormeau - Oxenford	14	196	615	0	811	32.7
Robina	21	559	799	0	1,358	54.1
Southport	16	142	904	0	1,046	48.7
Surfers Paradise	8	98	107	96	301	13.4
Queensland	1,003	12,601	34,208	733	47,542	2,045.5

Source: Australian Government Department of Health and Ageing. Australian government recurrent funding for aged care services in 30 June 2014

4.7.2 Allocated and Operational Commonwealth Funded Aged Care Place

This data from the Australian Government Department of Social Services (2012-14) relates to the DSS planning region of 'South Coast'. The South Coast planning region aligns to the GCHA boundary with the exception of SA2 areas Jacobs Well - Alberton and Ormeau - Yatala, which are therefore excluded from this data.

Increasing demand for community care is reflected by the utilisation of allocated Commonwealth places (as at June 2014). Across the South Coast, Queensland and nationally the full allocation of community places were operational. This is in contrast to residential care places which were utilised below allocation across all three regions³².

In 2012, South Coast had a lower ratio of allocated aged care places than both Queensland and Australia. However this shifted in both 2013 and 2014 with the South Coast having ratio's above both Queensland and nationally³².

Definitions

The definitions provided are adapted from the fifth report of Chief Health Officer Queensland, 2014.

Adults and age groups: adults are persons aged 18 years and older. Unless otherwise specified, all data in this report refer to the whole population, that is, those aged 0–85+ years. Children are defined in relevant sections and where not explicitly stated refer to the age group 5–17 years, consistent with national indicator reporting.

Age-standardisation: the adjustment of rates by relating them to a standard population to facilitate comparisons between various populations with different age structures (or the same population over time).

Avoidable deaths: deaths before the age of 75 years considered avoidable at the present time given available knowledge and comprising preventable and treatable deaths.

BMI (body mass index): measure correlated closely with body density and skinfold thickness, calculated as $\text{BMI} = \text{weight (kg)} / \text{height (m)}^2$. For adults, BMI less than 18.5 is underweight, 18.5 to less than 25 is normal, 25 to less than 30 is overweight and 30 or more is obese.⁴²¹ For children, BMI is compared with age and sex-specific BMI percentile charts.

Chronic disease: diseases of long duration and generally slow progression. In this report, chronic disease refers to either all non-communicable disease or selected chronic conditions as defined.

CI (confidence interval): in general, a range of values expected to contain the true value 95% of the time (95% CI).

Conscientious objection: is when a child's parent or guardian chooses not to have their child immunised and has lodged a signed conscientious objection form, also signed by a recognised immunisation provider, with the Australian Childhood Immunisation Register that declares immunisation of their child should not take place.

DALY (disability adjusted life year): measure of overall burden of disease and injury, where the DALY for a disease or condition is the sum of the YLL and YLD

Disability: temporary or long-term reduction of a person's capacity or function

Discretionary foods: as described in the Australian dietary guidelines 2013, discretionary foods are those that are not essential or a necessary part of a healthy dietary pattern. These foods are high in kilojoules, saturated fat, added sugars and/or salt or alcohol.

Domestic violence order: is a civil order made by a court that imposes conditions to protect a person from future domestic violence; they can be termed a protection order or a temporary protection order.

Exclusively breastfed: means the infant received only breastmilk (including expressed) and did not receive anything else (including water).

Hospitalisations: is the term used for the total number of separations in all hospitals (public and private) that provide acute care services. A separation is an episode of care which can be a total hospital stay (from admission to discharge, transfer or death) or a portion of a hospital stay ending in a change of status (for example from acute care to rehabilitation). About 98% of admissions comprise only one episode of care. Unless otherwise indicated all hospitalisation data refers to principal diagnosis only.

Hypertension: High blood pressure, often referred to as hypertension, is prolonged elevation of the blood pressure. The three criteria for diagnosis of hypertension or high blood pressure are:

- systolic blood pressure of 140 mmHg or more or
- diastolic blood pressure of 90 mmHg or more or
- receiving medication for high blood pressure.

ICD (International classification of diseases and health conditions): Standard classification of specific conditions and groups of conditions determined by an internationally representative group of experts and used for health records.

Incidence: number of new health-related events (for example, illness or disease) in a defined population in a defined period of time.

Infant mortality rate: number of deaths of children under 1 year of age in one calendar year per 1,000 live births in the same calendar year.⁴²⁰

Long-term condition: a medical condition (illness, injury or disability) which has lasted at least six months, or which the respondent expects to last for six months or more.

Low birth weight: less than 2500gm.

Life expectancy: average number of additional years a person of a given age and sex might expect to live if the age-specific death rates of the given period continued throughout their lifetime.

Notifications: reports of specified health conditions to government by medical practitioners, pathology laboratories and hospitals. In Queensland, this is legislated by the Public Health Act 2005.

Perinatal mortality rate: is the annual number of perinatal deaths per 1,000 births. Perinatal deaths include all fetal and neonatal deaths of at least 400gm birth weight or at least 20 weeks gestation.

PPHs (potentially preventable hospitalisations): admissions to hospital that potentially could have been prevented through the provision of appropriate non-hospital health services.

Premature death: in this report, generally refers to a death that occurs before the age of 75 years

Prevalence: a measure of disease occurrence or disease frequency often used to refer to the proportion of individuals in a population who have a disease or condition.

Preventable deaths: premature deaths which are considered avoidable because they are amenable to screening and primary prevention and reflect the effectiveness of the current health activities of the health sector.

Rates: refers to a measure of the frequency of the occurrence of an event or phenomenon in a defined population in a specified period of time.

Significant: a term used in this report to reflect a level of importance as well as statistical difference. In the context of statistical difference, non-significant results are described with terms such as 'similar', 'stable' or 'no difference'. In this report statistical significance is based on non-overlap of 95% confidence intervals.

Socioeconomic advantage or disadvantage: refers to populations profiled using the ABS Index of Relative Socioeconomic Advantage and Disadvantage. This index summarises information about the economic and social conditions of people and households within an area and includes characteristics of advantage and disadvantage, with areas categorised into quintiles.

Survival rate: the proportion of persons in a specified group alive at the beginning of the time interval (for example, a five-year period) who survive to the end of the time interval.

Treatable deaths: premature deaths which are considered avoidable because they are amenable to therapeutic interventions, reflecting the safety and quality of the current treatment system.

YLD (years of life lost due to disability): measure of burden of disease and injury, capturing the future loss of healthy years of life from new cases of conditions.

YLL (years of life lost due to premature mortality): measure of burden of disease and injury, calculated as the number of deaths multiplied by the standard life expectancy at the age at which death occurs.

Acronyms

ABS	Australian Bureau of Statistics
AEDC	Australian Early Development Census
AIHW	Australian Institute of Health and Welfare
BMI	Body Mass Index
CCQ	Cancer Council Queensland
CHD	Coronary Heart Disease
CNS	Central Nervous System
COPD	Chronic Obstructive Pulmonary Disease
CVD	Cardiovascular Disease
DALY	Disability Adjusted Life Year
dTpa	Diphtheria-tetanus-pertussis Vaccine
ERP	Estimated Resident Population
GCPHN	Gold Coast Primary Health Network
GI	Gastro Intestinal
GP	General Practitioner
HHS	Hospital and Health Service
HPV	Human Papilloma Virus / Human Papillomavirus Vaccine
ICD	International Classification of Diseases and Related Health Problems
NHPA	National Health Performance Authority
NOCS	Notifiable Conditions System
OECD	Organisation for Economic Co-operation and Development
PHN	Primary Health Network
PPH	Potentially Preventable Hospitalisation
QCCAT	Queensland Cancer Control Analysis Team
QH	Queensland Health
QHAPDC	Hospital Admitted Patient Data Collection
SA 2/3/4	Statistical Area 2, 3 or 4
VET	Vocation Education and Training
VV	Varicella Vaccine (Chickenpox)
YLL	Years of Life Lost

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